

Social and cultural discourses that shape male youth's
masculinity and conceptions of risk and vulnerability to
HIV and AIDS in Rundu Urban Constituency, Kavango
Region, Namibia

Thesis submitted to Rhodes University in fulfillment of
the requirements for the Degree of Masters of Education

By

Faustinus Shikukutu

Supervisor: Professor Jean Baxen

Dedication

This study is dedicated to my late mother

Declaration

I would like to declare that the work in this thesis is my own work and where other people`s work has been used (either from a printed source, internet or any other source) this has been carefully acknowledged and referenced in accordance with the university`s departmental requirements.

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F. Shikukutu

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Date

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Abstract

HIV and AIDS still challenges the best efforts of public health and medical establishments and continues to ravage communities around the world. While measures have been put in place to preclude it from further spread, recent studies in the field of HIV and AIDS prevention intimate that for more efficacious intervention to be realized, it is critical to understand and address the social and cultural practices which influence sexual behavior, particularly understanding how issues of masculinity plays a role in the perpetuation of these behavior. Relying on Bourdieu's theory of social practice, this study explores the inherent enduring nature of *habitus* and its role in the production and maintenance of masculine and sexual identities that predispose young men to HIV and AIDS.

The study was conducted in Rundu Urban Constituency in Kavango Region of Namibia to gain insight into male youth's masculinity and conceptions of risk and vulnerability to HIV and AIDS. The study design was qualitative and interpretive in nature. Data collection strategies included focus group discussions and individual interviews. Twelve male youth aged 17-20 years in two secondary schools (six in each) were selected to participate in the study. Four focus group discussions and fourteen individual interviews were conducted. Institutional ethical clearance from both regional education office and the schools were obtained before undertaking the study. Participants also signed written consent forms before interviews started.

The findings of this study revealed that young men from this community were under constant pressure to conform to dominant masculine norms and values. Key in the case of youth in the study was the need to procreate as a dominant marker of one's masculine and sexual identity because it represented a primary source of a 'real' man's social identity in this community. This masculine and sexual identity seemed in itself to be constructed along paternal lines and cultural beliefs, which youth preserved by not only complying, but also reproducing. The sexual activities they reported that would secure their position as 'real' men were often those that put them at risk and made them vulnerable to the epidemic.

Abbreviations

ANC:	Ante-natal clinics
FGD:	Focus group discussion
STI's:	Sexually Transmitted Infections
UNAIDS:	Joint United Nation Program on HIV/AIDS
UNICEF:	United Nations Children`s Fund
UNESCO:	United Nations Educational, Scientific and Cultural Organization
UNFPA:	United Nations Population Fund
USAID:	United States Agency for International Development
MOHS:	Ministry of Health and Social Services
WHO:	World Health Organization
DHS:	Demographic Health Survey
HIV:	Human Immunodeficiency Virus
AIDS:	Acquired Immunodeficiency Syndrome
YHDP:	Youth Health Development program

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Chapter 1 Contextualizing the Study

1.1 Introduction

Almost 31 years have passed since the first discovery of the HI-Virus and AIDS, and the epidemic is still challenging the best efforts by public health and medical establishments and ravaging communities around the world. According to Kyomugisha (2006:39) the work of medical and public health systems, conducted at a frenetic pace in the early years of the epidemic succeeded in identifying the causes of HIV and AIDS, determining the most common means of transmission, and proposing prevention measures to control its spread; but there is still no cure in sight.

The recent UNAIDS Report (2010: 21) reports that an estimated 33.3million people were living with the HI-Virus in 2009 worldwide of which 2.6million were new infections among adults and children. The same reports states that there were 1.8million AIDS related deaths among adults and children. The UNICEF Report indicates that many new HIV cases worldwide involve young people aged 15 -24 years (2011: 24).

Sub-Saharan Africa is considered to bear an inordinate share of the global HIV burden (UNAIDS, 2010: 28). Of the estimated 33.3 million people who were living with the HI-Virus worldwide at the end of 2009, 22. 5 million (67. 6 %) were in sub-Saharan Africa.

Southern Africa, of which Namibia is a member, is considered the epicenter of the epidemic with a combined infection rate of 11.3 million people living with HIV in 2009, 31% of new HIV infections and 34% of AIDS related deaths. This illustrates that the disease is far from over (UNAIDS, 2010).

Moore, Harrison and Doll (in Kyomugisha, 2006:40) highlight that during the early years of the AIDS epidemic, public health educators argued that acquiring accurate information and understanding the nature of HIV and its transmission would enable people to make informed decisions about behavior that protects them from infection. The assumption was that information would lead to informed decision making because people are rational and act in rational ways. Knowledge, it was assumed, would lead to people acting logically because they value their own

health and aspire to have relationships free of AIDS. They would also behave responsibly to eliminate the risk of infection or the spread of HIV, reject 'inaccurate' information or myths relating to HIV, develop positive attitudes towards safer sex practices, and develop positive attitudes towards those infected with the virus. These assumptions (of a rational being), as Moore, Harrison and Doll (in Kyomugisha, 2006) propose, are premised on an understanding that everyone understands and more or less, responds in the same way to information and orders behavior accordingly.

Despite numerous HIV prevention strategies during the past decade in sub-Saharan Africa though, the HI-Virus is still spreading (Fitzgerald and Behets, 2003), thus raising questions about the assumptions that underpin prevention programmes. For example, in their research, Marston and King (2006) show that prevention efforts often involve the distribution of free condoms and awareness raising that includes providing information through talks and pamphlets. They argue that such strategies and campaigns often still have unsatisfying results. Other findings in sub-Saharan Africa also show the contradiction that exists between knowledge of safe sex and reported behavior (Zambuko & Mturi, 2005: 569).

Women have been the target of many intervention programmes in countries where HIV prevention strategies were introduced. The basis (for women as targets for intervention programmes) is that they are biologically more vulnerable to the disease. A study by Scalway (2001:2), for example, indicates that young women have been the target of many AIDS education programmes. This, despite results that implicate men as more often than not, the ones who determine when and how often to have sex or whether to use a condom as well as having more multiple sexual partners; thus creating more risk to transmit HIV to their partners (Scalway, 2001:1). It is men, they argue, that ought also to be the target in intervention programmes.

The Joint United Nations Programme on HIV AND AIDS (UNAIDS, 2000) suggests that up to a quarter of the world's people living with HIV were young men under the age of 25 years. Given that young men account for so many of those living with HIV and that they practice so many forms of behavior that create HIV risk, it is surprising that there are relatively few services or

interventions designed with them in mind. There are also relatively few studies on their attitudes or sexual behavior and its articulation with HIV risk (Scalway, 2001). By and large, intervention programmes focus on protecting vulnerable groups from the HI-Virus, and seem to neglect the groups that often unknowingly *create* vulnerability (Scalway, 2001:2). Agreeing with Scalway, Flood (2003: 3) states that few studies focus on men's involvement in safe or unsafe heterosexual sexual practices. Far more research focuses on heterosexual transmission of HIV among women. Very few education campaigns have been aimed at heterosexual men. Braeken, Fransen & Shand (in Wellbourn & Hoare, 2008:75) point out that despite young men being the main contributors to HIV transmission, the international response to date has placed greater emphasis on the vulnerability of young women and girls.

Some studies show the strong relationship between social and cultural forces that shape sexual behavior and HIV infection. For example, while providing information and condoms are important, it often seems insufficient to change risk behavior (Marston & King, 2006). Research findings in South Africa by Harrison, Xaba, Kunene & Ntuli (2001) confirm that although a growing body of research has highlighted youth vulnerability to high levels of HIV infection, there is still paucity in research to explain their continued sexual risk behavior. Scholars such as (Kisekka 1995; Dowsett, Aggleton, Abega, Jenkins, Marshall, Runganga, Schifter, Tan & Tarr, 1998; Myers, Bullock, Calzavara, Cockerill, Marshall & George-Mandoka, 1999; Bohmer & Kirumira, 2000) all propose that sexual behavior is socially rather than individually constituted and that the meaning a community gives to particular behaviors vary within different socio-cultural contexts. Therefore, it may not make sense to speak of risk and risky sexual behavior without understanding the contexts in which such behavior occurs or is located. A study by Bohmer and Kirumira (2000:270) which examined the complexity of youth relationships, socio-cultural contexts and sexuality meanings called for re-thinking the sexuality of young people with "a prioritizing of young people in relation to risk-in-context as distinct from merely as at-risk by definition."

According to Caldwell (in Silberchmidt, 2004:43), Africans have been educated through AIDS programs to know that the disease is deadly and is largely spread among them by high-risk sexual activities; with results not showing a decrease in infection rates. He argues that the

pandemic cannot be defeated by *more* education. To qualify his sweeping (and pessimistic) claim, Caldwell (in Silberchmidt, 2004:43) posits that HIV and AIDS prevention campaigns that lead to behavior change will only be successful if proper attention is given to the wider socio-economic context, and to issues of gender, gender relations and sexuality.

1.2 Problem Statement

Namibia, like other Southern African countries, has been affected heavily by high HIV infection rates (Notkola, Timaesus & Siiskonen, 2004). According to the recent National HIV Sentinel Survey carried out by the Ministry of Health and Social Services (MoHSS, 2010), HIV remains a major public health problem in Namibia affecting all regions, with a prevalence of 18.8% among pregnant women attending Ante-natal clinics (ANC). The epidemic is also identified to have an impact on the Namibian education sector constituting a major threat to the nation's human capacity and as a consequence, the country's ability to sustain consistent and competitive performance of attaining its vision 2030 goals (Asemota, 2007).

The first HIV infection in Namibia was reported 25 years ago in 1986. The epidemic proceeded to grow rapidly at a prevalence of 22% in 2002 and 19.7% in 2004. This pattern of continued decline is noted in the most recent ANC sentinel surveillance finding in 2010, where the national prevalence rate is reported to be 18.8% (MoHSS, 2010). The decline notwithstanding, HIV prevalence in this country remains high relative to the international rate, which is reported to be at 0.8 % (UNAIDS, 2010).

As elsewhere in Africa, programmes on HIV and AIDS in Namibia have included efforts to educate youth on the dangers of the pandemic. HIV and AIDS topics are integrated across the curriculum in schools and the Ministry of Education in Namibia with assistance from United Nations International Children's Emergency Fund (UNICEF) introduced an after-school youth programme: "My Future is My Choice" (Ndjoze-Ojo & Kandji-Murangi, 2000). In conjunction with the Youth Health Development Program (YHDP), the programme is offered in schools to strengthen the ministry's HIV and AIDS prevention strategies (Ndjoze-Ojo & Kandji-Murangi, 2000: 6). However, while there has been an appreciable increase in the level of awareness about HIV and AIDS and prevention methods, this has not translated into safe or safer sexual behavior.

Research conducted by Schwarz (2003) in Namibia found that despite results regarding basic and advanced knowledge levels about HIV and AIDS being promising; there remains some cause for concern because youth continue to engage in risky sexual activity. Van Zyl and Keulder (in Schwarz, 2003) point out that, while HIV and AIDS is commonly identified as the main risk of sexual activity (closely rivaled by pregnancy among females), it is still not the top concern among young people. Almost 38% of young people saw unemployment as the main problem affecting them and their future compared to 13% that named HIV and AIDS as a concern. Another study by Le Beau, Fox, Becker & Mufune (2001) also carried out in Namibia confirms that while knowledge of reproductive health issues such as AIDS/HIV/STI prevention and contraceptive methods were generally reported to be high among the population, behavior change has yet to be noticeable. Although young people are expected to adopt safe and safer sexual behaviors given the information they are known to have, the consistent increase in HIV prevalence and emerging research points to environments not always being conducive to them embracing risk reduction behaviors. In fact, little is known about the contexts in which youth interact with knowledge to produce particular behaviors. Some research has begun to identify a series of underlying factors that shape decision-making with regard to safer sex (see Schwarz, 2003:20). This though gives little insight into how young people interact with HIV knowledge to understand themselves in relation to risk and risky sexual behavior.

My study, therefore, aims to contribute to this emerging body of literature and seeks to gain insight into the socio-cultural practices that shape male youth's masculinity, beliefs, experiences, and perspectives in relation to HIV vulnerability. This study responds to some of the following questions: How do male youth understand themselves as men in relation to the gender norms of their community? What are the dominant discourses shaping constructions of sexuality and masculinity in the Rundu Urban community? Which social and cultural practices render young men vulnerable to HIV infection? These questions are premised on an assumption that although young men have the knowledge about the danger of HIV, tensions might exist in the way this information is mediated in and through social and cultural practices in the community of which they are a part.

By definition, the term youth, is a complex phenomenon. It is perceived in different ways and comes with a variety of expectations and interpretations. For those living in present-day Western cultures, the term refers to persons who are no longer children but not yet adults. In a strictly legal sense, the term is typically applied to a person from the time of their early teens until a point between the age of 16 and 21, after which time the person is legally an adult. The United Nations, for example, defines youth as people between the ages of 15 and 24 years inclusive (UNESCO, 2002). The term youth in Namibia generally refers to those aged 16 to 35 years old, as this is the definition adopted by the National Youth Council in Namibia (National Youth Council Act, 2009). For the purpose of this study, therefore, the term youth will refer to those aged 16-25 years.

1.3 Context of the Study

Kavango, one of 13 regions in Namibia, is divided into nine constituencies¹. It consists of four main hospitals (Andara, Nankudu, Nyangana and Rundu). Rundu Urban constituency covers the urban area of Rundu, one of Namibia's largest towns. The town is surrounded by informal settlements (Kehemu, Ndama and Sauyemwa). The total population of the region according to the 2011 population and housing census preliminary results, is 222 500 of which 105 100 (47.2%) is male and 117 400 (52.8%) female. Rundu Urban's population mirrors the national gender profile in that out of the reported 20 700, 11 100 (53.6%) is female and 9 600 (46.4%) male (National Planning Commission, 2011). Although the national figures of youth aged 15-34 is not shown in the latest preliminary census report, the National Planning Commission (2001) reports that youth comprised 41.1% of the total population during the 2001 population and housing census report. Of this figure, 18.6% were male.

The national HIV prevalence rate is 18.8% among those aged 15-49 years. The main hospital in Rundu Urban reported a HIV prevalence rate of 23.2% while other main hospitals in Kavango region like Andara, Nankudu and Nyangana, reported rates of 19.2%, 13.5% and 12.8% respectively (MoHSS, 2010). Given the prevalence rate of the Rundu Urban constituency, it made sense to select this location to carry out the study.

¹ The nine constituencies are Kahenge, Kapako, Mashare, Mpungu, Mukwe, Ndiyona, Rundu Rural-East, Rundu Rural-West, and Rural Urban.

On a more personal level and as a principal of a secondary school in this region, I noticed a growing trend in the number of learners who are infected with the HI-Virus as well as consistency in the teenage pregnancy. In my school alone, there were 21 pregnancies out of 213 female learners in 2009, 23 out 202 female learners in 2010 and 20 pregnancies out 230 female learners in 2011. While pregnancy may involve older men, the trend in this region is that boys of school-going age are primarily responsible for impregnating girls. Such experiences led to the questions that are central to this study.

1.4 Aim of the Study

This study investigates the social and cultural practices that shape male youth's sexuality and masculinity and their conceptions of risk and vulnerability towards HIV AND AIDS infection in Rundu Urban Constituency. It seeks to contribute to the growing body of knowledge² on the importance of paying attention to social and cultural practices as a way to better understand why, in the face of adequate information, young people continue to predispose themselves to risky sexual behavior, and by implication, to HIV infection.

1.5 Main Research Question

What are the social and cultural practices that shape male youth's masculinity and conceptions of risk and vulnerability towards HIV infection in Rundu Urban Constituency?

The following sub-questions guide the research:

- What are the social and cultural practices that shape male youth's masculinity in Rundu Urban Constituency?
- What are male youth's conceptions of risk toward HIV infection in Rundu Urban Constituency?
- How does a select group of male youth perceive their vulnerability toward HIV infection?
- How do the socio-cultural practices shape male youth's vulnerability to HIV and AIDS infection in Rundu Urban Constituency?

² See Le Beau *et al.*, 2001; Schwarz, 2003; Lawoyin & Kanthula, 2010.

1.6 Chapter Overview

Chapter 1 introduced the research topic and provided the motivation for this study. This chapter also situated the study contextually, providing a rationale for its importance. It ended with an outline of the aims and the main research question as well as the sub-questions that guide the study.

In **Chapter 2**, I developed a conceptual framework that gave an account of the formation of masculine and sexual identity. This framework offered some insight into how social and cultural practices shape the lived experiences and how the former is said to structure social action. The framework offered explanatory and some analytical tools to understand how the beliefs, values and habits shape male youth either to conform, regulate or transform sexual behavior (including conceptions of risk and vulnerability towards HIV) are embedded in discourses that shape constructions of sexuality and, in the case of this study, masculinity. The chapter specifically focused on concepts that include gender and sex, sexuality, masculinity, and risk and vulnerability to HIV and AIDS.

Chapter 3 introduces the theoretical framework to understand how the male youth in this study come to hold certain beliefs about masculinity and sexuality and how they are socialized into the social and cultural practices of the community they are part of. I used this framework to explain how agents (male youth) were regulated (or which they transformed) by the values and beliefs of their community to act in a certain way. To do that, I drew on social theory; in particular Bourdieu's theory of practice as an explanatory tool for understanding the beliefs, dispositions, experiences, and practices of the male youth in this study which predisposed them to risk and vulnerability towards HIV and AIDS.

Chapter 4 analyses the studies on social and cultural practices and youth vulnerability to HIV and AIDS that relate to this study. This analysis enabled me to not only locate my study, but also identify gaps in that research, some of which my study addressed.

Chapter 5 describes the research design of the study. I begin this section with a discussion on the methodological orientation of the study. I provide an explanation of the research decisions I

made by outlining the methodology, site, sample, data gathering strategies, data analysis process, and the ethical considerations. This chapter ends with a brief outline of the significance of the study.

I present the results in **Chapter 6**. Using interviews (focus and individual) as a main source of data, this chapter presents the perspectives and experiences of a select group of male youth of the social and cultural practices that shape their conceptions of risk and vulnerability to HIV and AIDS.

Chapter 7 discusses the findings of this study in terms of their implications for male youth in Rundu Urban constituency. This chapter also relates the findings of the study to the field described in chapter two and into which it proposes to contribute.

Chapter 8 concludes this study and offers insights that may have implications for future areas of research. It offers a summary of the main findings and considers the contribution of this research. This chapter also suggests possible solutions to the problem and indicates directions for further research.

Chapter 2 Discourses on Sexuality, Masculinity, Risk and Vulnerability: implications for understanding HIV and AIDS

2.1 Introduction

This study, that attempts to understand human experiences of risk and vulnerability towards HIV and AIDS, recognizes that HIV is integrally linked to discourses on masculinity and the concomitant discourses of gender and sexuality. The beliefs, values, norms, and habits shaping male youth to conform, regulate or transform sexual behavior (including conceptions of risk and vulnerability towards HIV) are embedded in discourses that shape constructions of sexuality and in the case of this study, masculinity. It is for this reason that what follows includes an exposition of these concepts as they don't only frame the study, but also provide tools for analysis later on in this study. I focus specifically on concepts that include gender and sex, sexuality, masculinity, and risk and vulnerability to HIV and AIDS. While these are discussed separately for the sake of the study, their interrelatedness will become apparent in the discussion.

2.2 Discourses on Gender and Sex

Any discussion on sexuality and masculinity needs to consider discourses on gender and sex for reasons that will become clearer below. Esplein & Jolly (2006) point out that the term gender has been increasingly used to animate the distinction between the term and sex. One's sex is biologically determined and gender is socially and culturally constructed. A number of scholars agree with the notion that gender is socially constructed (Morine, 2009; Gupta, 2000; Parker & Gagnon, 1995) and that it is a social construct that differentiates women from men; defining the way in which women and men interact with each other (Gupta, 2000:1). One's sex, on the other hand, is determined biologically and refers to an individual's physical anatomy, genitalia, facial hair, body structure, and biological composition (Morine, 2009). For Esplein & Jolly (2006:2), one's sex marks the distinction between women and men as a result of their biological, physical and genetic differences while gender roles are set by convention and other social, economic, political and cultural forces. Similarly, Ragnarsson (2010:16) points out that beyond the physical determinants of sex, the term gender is more commonly defined as the deeply rooted, socio-culturally constructed expectations of women and men that influence their behaviors and opportunities. Based on the above and as Goldstein (2003) argues that sex is fixed and based on

one's biological make-up while gender is fluid and best understood in the social and cultural context in which it is constructed.

Gender, according to Jewkes and Morrel (2010:1), describes differences in the way in which men and women position themselves and act as social beings; i.e. the differences in which particular societies define gender roles. It depicts the way male and female are constructed as a man or woman based on the power and responsibility accorded to them. They argue further that it is gender, not sex, which is more influential in determining behavior (Jewkes & Morrel, 2010). According to Courtenay (2000:6) and from a social constructionist perspective, girls and boys are not blank slates that are written on or "socialized"; rather, they are active participants along with the world around them in the construction and reconstruction of gender.

Gilchrist & Sullivan (2006:196) point out that from a social constructionist perspective, the understanding of gender and identity lies in the belief that different gendered subjectivities may be experienced by individuals, and these are constructed both actively from within the individual and by external influences. The context in which this takes place is critical in determining how males and females make meaning of themselves as women and men.

Connell (2002) argues that the construction of individual identity (of which gender is a key signifier) is complex, fluid and changing. While this may be the case, Gilchrist & Sullivan (2006:196) emphasize that there are undeniably dominant cultural and social constructions that constitute appropriate feminine and masculine behavior and that these exert a strong influence on individuals. The importance of context in this discussion is thus undeniable given that gender is socially constructed and that it is neither fixed nor universal, but varies over time and across cultures.

In part, patterns of social interaction are informed by the meanings attached to one's gender; thus, the ways in which gender identity operates cannot be separated from understandings of sexuality, as I explain briefly below.

2.3 Understanding Sexuality

Gupta (2000:2) states that sexuality is distinct from gender yet intimately linked to it. It is the social construction of a biological drive. An individual's sexuality is defined by whom one has sex with, in what ways, why and under what circumstances, and with what consequences. She continues, '[S]exuality is more than sexual behavior; it is a multidimensional and dynamic concept which has explicit and implicit rules imposed by society, as defined by one's gender, age, economic status, ethnicity and other factors which influence an individual's sexuality' (Gupta, 2000:2). For Jackson (2006), while 'sex' denotes carnal acts, 'sexuality' is a broader term referring to all erotically significant aspects of social life and social being, such as desires, practices, relationships, and identities. This definition of sexuality assumes fluidity, since what is sexual (erotic) is not fixed but depends on how it is defined, socially and historically. Hence, sexuality has no clear boundaries; what is sexual to one person in one context may not be to someone or somewhere else (Jackson, 2006:106). The development of the sexual self, therefore, does not happen in isolation. Rather, it is context dependent; hence, the need to understand how individuals identify themselves as male or female. In the next section, I focus only on masculinity given the focus of the study. However, I do acknowledge the complex interplay between masculinity and femininity.

2.4 Masculinity as a Social Construction

Connell (in van Klinken, 2011: 276) states that masculinity is a social construction and that it depicts male gender identities and men's place in gender relations. Like Connell, van Klinken (2011: 276) agrees that, as with gender, masculinity is a social construct. The social construction of masculinity as argued by Moscovici (in Skovdal, et.al., 2011) are forms of knowledge that include values, ideas and practices, which enable people to orientate themselves in their social world. These include local constructions of gender and gendered identities. In the process of identifying themselves as men, individual men situate themselves in relation to the norms and representations that define dominant notions of masculinity in particular contexts (Lindegger & Maxwell, 2005; Nzioka, 2001; Lindegger & Quayle, 2009). Chitando (in van Klinken, 2011: 277) emphasizes that adopting this social constructionist perspective acknowledges the importance of men's socialization into masculinities that more often than not maintain gender inequalities. He states, "... while being male is a biological factor, the process of expressing

manhood is informed by social, cultural and religious factors” (Chitando in van Klinken, 2011: 277). Kaufman, Sheffer, Crawford & Simbayi (2008), for example, point out that masculinity in many African societies is often defined by the amount of power a man has over women, not only in terms of sexuality, but in decision-making in other areas.

A social constructionist understanding opens up the discursive space to investigate how masculinity is constructed in relation to particular social norms, for example specific social and cultural practices. Precisely because of the fact that masculinity is constructed in connection with context-specific structures and relations, it has become common to speak about masculinities in the plural (van Klinken, 2011:277). Connel (in van Klinken, 2011:276) argues that even in one context several masculinities co-exist, placing men in a dynamic male gender order of contesting understandings of what it means to be a man, as will become evident later on in this study.

According to Lynch, Brouard and Visser (2009:17) constructions of masculinity in some cultural contexts position men to be more experienced and knowledgeable about sex. Such norms put men at an increased risk of contracting HIV by pressuring them into sex to ‘prove’ their manhood (Lynch et. al., 2009:17). Young men in such contexts may be at risk of HIV infection as such norms prevent them from seeking information or admitting their lack of knowledge about sex or methods of protection.

Ideologies of masculinity, which emphasize the display of sexual prowess and risk taking are often associated to risk and vulnerability, which I explore briefly in the next section.

2.5 Risk, Vulnerability and HIV and AIDS

Risk and vulnerability are contested and complex terms. In the context of HIV/AIDS, risk is defined as the probability that a person may acquire HIV infection (Aggleton, 2004:7). Aggleton (2004) makes the point that certain behaviors create, enhance, and perpetuate such risk and that these might include either unprotected sex with a partner whose HIV status is unknown, multiple unprotected sexual partnerships, lack of adherence to infection-control guidelines in the health care setting, transfusions of untested blood or injecting drug use with shared needles and syringes (Aggleton, 2004:7). Vulnerability on the other hand “refers to the likelihood of being

exposed to HIV infection because of a number of factors or determinants in the external environment, some of which are beyond the control of a person or particular social group” (UNAIDS, 2005). Aggleton (2004:7) states that in the context of HIV/AIDS, vulnerability is influenced by interaction between different sets of factors that may be personal and/or societal. Personal factors include, for example, the availability of knowledge and skills required to protect oneself and others and membership of specific social networks that may enhance or reduce the likelihood of infection. Societal factors influencing vulnerability include cultural norms, laws, social practices and beliefs that act as barriers or facilitators to prevention messages. Such influences may lead to the inclusion, neglect or social exclusion of individuals depending on their lifestyles and behaviors and, more pertinently, due to socio-cultural characteristics (Aggleton, 2004:8). According to Hubert & Delor (in Walker and Gilbert, 2001:11), the HIV/AIDS epidemic has been linked to the term ‘vulnerability’ for the fact that many people might be involved in risky sexual activities. In applying the concept, they argue that all human beings are biological susceptible to infection by different diseases including HIV/AIDS. However, certain social factors place some individuals and groups in situations of increased vulnerability (Walker and Gilbert, 2001:11).

A large part of the risk to HIV infection facing male youth concerns the challenge they face in dealing with constructions of their sexual identity. This challenge involves conforming to or challenging the gender roles in the society in which they make meaning of their sexuality and the need to relate to others in an intimate ways. According to Skinner (in Baxen and Breidlid, 2009:95) the vulnerability of young men to HIV infection is exacerbated by the fact that most of them have not yet selected their life partners and are likely to change sexual partners. During this stage of their development, some young men may also be at risk of HIV infection through factors such as substance use and other socioeconomic factors that may include poverty; all of which may lead to sexual practices that predispose them to HIV infection (Buve, Bishikwabo-Nsarhaza & Mutangadura, 2002).

Through social interaction, young men learn socially and culturally informed norms that shape their sexuality and may determine their sexual behavior (LeClerc-Madlala, 2001). Ilkkaraca and Jolly (2007:8) argue that some societal expectations (e.g. men to know about and take control in

sex encounters) may discourage men from admitting ignorance and preclude them from, for example, seeking information about safer sex; thus making them vulnerable. They may also unwittingly practice behavior that puts them and their partner(s) at risk. It is for this reason that one cannot discuss HIV and AIDS without considering risk and vulnerability, and as this study proposes, understand the social and cultural conditions in which youth make meaning of their sexuality and its articulation with the former.

However, how do youth come to hold the beliefs, dispositions they hold? How do they become socialised into the social and cultural practices? How do they come to embody or reject some of the practices expected by their communities? Do they have room to practice different sexualities or act outside the norm or what is expected in their communities? Such questions in a study like this require a theory of practice that begins to explain how individuals come to hold the beliefs and dispositions they do. Therefore, below I introduce Bourdieu's theory of practice as a theoretical framework that goes some way to provide explanatory tools for understanding the beliefs, dispositions, experiences, and practices of the youth in this study.

Chapter 3 A theory of Practice to understand Youth Risk and Vulnerability toward HIV and AIDS

The study draws on Pierre Bourdieu's theory of practice to understand the social and cultural practices that shape young men's masculinity and conceptions of risk and vulnerability to HIV and AIDS. According to Webb, Schirato and Danaher (2002:21), Bourdieu's theory of practice is mainly concerned with how to understand and explain the interaction between "people's practices and the contexts in which those practices take place." Bourdieu states that subjects act as agents in the construction, adjustment, and transformation of society, social practices, and institutions. He further argues that people are constituted within and by the practices in which they participate (Webb, Schirato and Danaher, 2002). These practices include discourses, institutions, rules, regulations, and values. Bourdieu (1990) believes that it is through the interaction of field, *habitus* and capital that practices are generated.

According to Swartz (2002:655) beliefs, norms, and values of a society are not generated in a social vacuum but in structured social contexts, which Bourdieu calls fields. The field as Rafanell (2003:4) points out are the arenas, or social environments, where given conditions are in place and at play. These social environments (field) embrace the social relationships and cultural milieus within which defined groups of people function and interact (Barnet & Casper, 2001: 465). By field, Bourdieu (in Powell, 2008:172) means "irremissible conventions, values, discourse or the `rules of the game` that are the contexts for social interactions." According to Nascimento and Marteleto (2008:400) fields are micro cosmos or social spaces structured by the set of actions, representations, interactions and social forces, power relationships, attractions or repulsions that subjects experience. Bourdieu (in Webb, *et. al.*, 2002) refers to contexts as 'cultural fields', which include but are not restricted to discourses, rules, rituals, conventions, values, institutions, and regulations. Baxen (2010:56) further states that the cultural field according to Bourdieu, is constituted within power relations; a dynamic discursive space that is not only made up of rules and institutions but also of the interrelationships between institutions, rules and practices. Bourdieu (in Baxen, 2010:56) argues that it is in the cultural field where attitudes and practices are produced and transformed, since subjects actively participate to produce them just as they are produced by them. Rafanell (2003:4) posits that being located in a

given field exposes individuals to such practices and attitudes which results in the development of a '*habitus*'.

People embody the shared beliefs, values, customs, behaviors, and artifacts that are practiced in a particular structure (field) in order to interact with different members of their society. Bourdieu maintains that society shapes individuals through socialization but that the very continuity and existence of society depends on the ongoing actions of the individuals (Swartz, 2002:635) through what he calls the *habitus*. According to Hine (2010) *habitus* for Bourdieu is a set of dispositions, which predispose agents to act in certain ways in the field. These dispositions generate practices, perceptions and attitudes, which are 'regular' or 'expected' without being consciously coordinated or governed by any conscious 'rule'. Hine (2010) states that *habitus* predisposes members of a society to interact in ways consistent with the social norms of their group. He makes the point that *habitus* is the social, cultural, and physical environment that people as social beings inhabit, through which they know themselves and through which others identify them (Hine, 2010).

Nascimento & Marteleto (2008:400) point out that *habitus* is what the subject (agent) has incorporated in terms of language, cultural biography and individual history, essentially shaped by his/her social trajectory within family, through its moral system (primary *habitus*) and by the cultural heritage (secondary *habitus*). Therefore, although the *habitus* is a product of early childhood experience, and particularly socialization within the family, Di Maggio (in Reay, 2004) argues that it is continually re-structured by individuals' encounters with the outside world.

Lynam, Brown, Reimer Kirkhamb & Anderson (2007) uses the aspect of culture as *habitus*, which refers to features of the individual, his/her viewpoints, and physical 'dispositions' towards navigating the social world. *Habitus* is generally acquired in the home context, but extends to a range of social environments and the relationships that characterize them. It is also worth noting that although *habitus* allows for individual agency, it also predisposes individuals towards certain ways of behaving. This is confirmed by Bourdieu (1990: 77) who argues that *habitus*, as a system of dispositions to a certain practice, is an objective basis for regular modes of behavior, and thus for the regularity of modes of practice. He states that if practices can be predicted, this

is because the effect of the *habitus* is enduring and often predisposes agents to behave in a certain way under certain circumstances. Thus, the *habitus* acts as internal radar and predisposes the agent (subject) to act or respond in a certain way (Baxen, 2010:63). According to Baxen (2010:64), people are socialized through the day-to-day practices in their everyday lives. *Habitus*, therefore, is acquired in and through practice (Baxen, 2010:64).

The third component in Bourdieu's theory of practice is 'capital'. Lynam, *et. al.*, (2007) define capital as a range of resources that can be social, material, cultural and symbolic. According to Bourdieu (in Baxen, 2010:58), capital refers to a form of worth associated with culturally legitimated and authenticated practices, tastes, dispositions, patterns of utilization, characteristics, and competencies deemed valuable or 'worthy' within a field. Whilst Cheal (in Baxen, 2010:58) suggests that capital refers to "a possession that gives individuals the ability to do certain things, such as exercising domination over other. Bourdieu (1988) states that *habitus* is determined by the accumulated knowledge of the subject (agent)-capital, and is related to the possession of its different types (Nascimento & Marteleto, 2008). According to Rafanell (2003:4) capital provides each individual with socially acquired dispositions and serves as the basis of the dynamics of interaction between individuals within fields.

In this study, Bourdieu's theory of practice was useful to explain how individuals (in the case of the study, male youth) come to hold the beliefs, values, and norms on masculinity and risk and vulnerability toward HIV infection. His theory was useful to understand the social and cultural practices from and through which a select group of youth construct masculine identities as well as how they make meaning of their lives in relation to risk and vulnerability towards HIV and AIDS. Put differently, this theory of practice was useful to gain insight into male youths' accumulated knowledge (capital), beliefs, norms and values (*habitus*) regarding masculinity (and concomitant gender roles learned from the particular social and cultural contexts (field) to construct their sexuality and masculinity, aspects deemed critical to understanding risk and vulnerability towards HIV infection. This theory not only helped to understand the conditions that mediate or regulate behavior, but also the circumstances in which youth first, reproduce or transform behavior and second, makes meaning of themselves in relation to HIV risk.

Few studies, as I outline below, consider the complex spaces where HIV and AIDS interacts with discourses on masculinity and sexuality. I trace research related to this study below. I have been selective in that I only include studies that relate to socio-cultural practices and their mediatory role in shaping vulnerability and risk toward HIV infection. I do this to highlight gaps in research to which this study seeks to contribute.

Chapter 4 Studies on Social and Cultural Practices and Youth Vulnerability to HIV and AIDS

What follows below is a brief description of a select number of studies that also examined socio-cultural practices in relation to vulnerability and risk toward HIV infection. I do this to locate the current study and highlight the gap in the literature into which this study seeks to contribute.

A study by Bohmer and Kirumira (2000) conducted in two Ugandan communities among 46 out-of-school females and 53 males, aged 12-19 years, found that socio-cultural practices play a role in shaping youth's vulnerability to HIV infection. This study provided a descriptive analysis of the cultural and socio-economic contexts that shape young people's sexual perceptions and behavior. The study revealed that certain socio-cultural practices such as poverty influenced sexuality-related perceptions and behavior of young people. Participants of this study expressed intense interest in sex and were influenced by the sexual behavior of other community members. While both males and females accepted that sex involved some exchange of money or gifts, each gender experienced different pressures and motivations within the negotiation process. The study further found that financial pressures played a large role in influencing out-of-school girls to begin engaging in sex in order to meet basic needs.

Other studies suggest that gender norms are among the strongest underlying social factors that influence sexual behavior. According to Barker and Ricardo (2005), norms related to masculinity and sexuality, such as those which espouse male sexual needs as uncontrollable, multiple partners as evidence of sexual prowess, and dominance over women (physical and sexual), can place young men and young women at high risk of HIV infection.

Other research in sub-Saharan Africa reveals linkages between notions of masculinity and sexuality and their articulation to risk of HIV infection. For example, Price and Hawkins quoted by Brown, Sorrel & Raffaelli (2005) report that young men in Zambia talked about sexual relationships as central to their self-esteem and social status. Similarly, in a Xhosa township in South Africa, the number of girlfriends a boy has was found to be a defining feature of what it means to be a man (Wood & Jewkes, 2001). Their belief, according to Leclerc-Madlala, Simbayi and Cloete (2009), is associated with beliefs that men cannot live without sex and with condoms

being viewed as an obstacle to sexual enjoyment. These authors argue that the phrase “playing with the girls”, for example, positions boys as having the power to manipulate girls to satisfy their own sexual needs. Similarly other studies by Dunne, Humphreys & Leach (2006) and Ampofo & Boateng and Sathiparsad (in Leclerc-Madlala, *et. al.*, 2009), indicate that such comments highlight the notion of unrestrainable male sexuality and perpetuate the practice of multiple sexual partners. The comments indicate that the sexual identity of males in these communities is defined by their sexual ability and achievement; a conclusion confirmed by Pattman (in Leclerc-Madlala, *et. al.*, 2009).

In a study of young men in South Africa and Zimbabwe, Pattman (in Leclerc-Madlala *et. al.*, 2009) stressed that within the collective peer identity of male students, part of the masculinity discourse included boasting about sexual performance. This may be reinforced, as Silberschmidt (2004) points out, by the belief that a man who cannot handle several women is not a real man. She examined the way in which masculinity and male sexual behaviors have been affected amongst rural and urban East African youth. Her study found that a man’s need for sexual or extramarital partners is particularly urgent ‘when a man has lost control over his household and is humiliated by his wife’, and ‘when a man’s ego has been hurt’ (Silberschmidt, 2004:50). Leclerc-Madlala, *et. al.*, (2009) in their study found that men perceived themselves to be naturally superior to women and often considered it a cultural right to have multiple partners. In support of the statement, Eaton, Flisher & Aarø (in Leclerc-Madlala, *et. al.*, (2009), point out that such behavior was generally equated with notions of a normative masculinity.

Young men in many cultures, Africa included, experience pressure from peers to be sexually active and have multiple partners, in order to be seen as men. Buhi & Goodson and Pedlow & Carey (in Bauermeister, Elkington, Brackis-Cott, Dolezal and Mellins, 2009:1112) agree by stating that peers have been identified as an important influence on the sexual behavior of adolescents in a wide range of populations. In support, Crosnoe and McNeely (in Bauermeister, *et.al.*, 2009:1112) argue that youth become involved with groups whose values and norms are perceived as attractive or similar and, in turn, incorporate these norms into their behaviors. Studies by Tenkorang & Fernando; Ilika & Igwegbe and Termin, *et. al.* (in Tenkorang and

Maticka-Tyndale, 2008:185) all confirms this. They all found that youth often have sex for the first time because of social pressures and environmental conditions.

Like the above, a study conducted in Nigeria by Ankomah, Mamman-Daura, Omoregie and Anyanti (2011) also found that friends played a major role in the experiences of first sexual encounters, especially among male youth and that young men pointed to friends as the main motivation for them to engage in first time sex. In his study, Marsiglio (in Barker and Ricardo, 2005:16) points out that these sexual experiences may be viewed among peers as displays of sexual competence or achievement, rather than acts of intimacy. Another study by Buve, *et. al.*, (2002) indicated that young men and boys were often encouraged by peers to demonstrate their masculinity through early sexual initiation and many sexual conquests. While conducting research in South Africa and Kenya respectively, Varga and Nzioka (in Tenkorang and Maticka-Tyndale, 2008:185) found that males were pressured to be highly sexually active in order to be socially recognized as physically mature or appropriately masculine. In their study Buve, *et al.* (in Rohleder, Swartz, Kalichman and Simbayi, 2009:45) indicated that there had been much evidence in Africa of peer pressure and attendant norms, which involve the ‘proving’ of masculinity through early sexual conquests and having multiple sexual partners.

The consequence of the above, according to Lindegger and Maxwell (in Rohleder *et. al.*, 2009:45), is that adolescent boys experience extreme peer-based pressure to demonstrate their masculinity through claims of multiple sexual partners, and that the inability to measure up to these expectations produced enormous anxiety. Zakwe (in Rohleder *et. al.*, 2009:45) revealed that exposure of such failures may result in immensely shameful experiences which played a key role in policing behaviors associated with hegemonic masculinity.

Negative attitudes towards condom use in sub-Saharan Africa were associated with cultural factors, for example, the desire for children and female sexual compliance (Campbell, 1997; Macphail and Campbell, 2001). The use of condoms amongst some communities is believed to be unnatural; a tool used by men to prevent disease or children (Meyer-Weitz, *et. al.*, 1998; Ulin, 1992). According to these authors, condom use was seen as a ‘waste’ of sperm and that their use conflicted with the emphasis on fertility in African culture (Caldwell, *et. al.*, 1994; Grieser *et. al.*,

2001; Lachenicht, 1993). While these studies occurred more than a decade ago, beliefs such as these persist, despite knowledge on the subject as will be evidenced in the current study later on. Studies in South Africa show an increase in condom usage in the last decade (Leclerc-Madlala *et. al.*, 2009). Nonetheless, as Versteeg and Murray (2008) point out, the behavior of having multiple partners remains risky and the use of condoms can give a false sense of safety if not applied consistently in all sexual encounters.

A study by MacPhail and Campbell (in Barker and Ricardo, 2005) revealed that in some settings, the notion of masculinity was associated with an ideal of unprotected (flesh-to-flesh) sex as more pleasurable, often with numerous partners. According to them these sexual behaviors and gender stereotypes may be reinforced among peers. Their findings show that young men may be belittled by peers for using condoms and, as a result, may decide to not use them in future sexual encounters (MacPhail & Campbell, 2001). They point out that young men may display uncertainty and lack of confidence regarding the proper use of condoms, in the face of prevailing norms that makes it difficult for them to express these doubts (MacPhail & Campbell 2001).

Some studies such as MacPhail & Campbell (in Barker & Ricardo, 2005) reveal distrust in condoms by participants, proposing that they are defective or ineffectiveness.

Yet another social practice shaping youth vulnerability cited in the literature, was the excessive use of alcohol or any other illicit drugs (Leclerc-Madlala, *et. al.*, 2009). A study by Khasakhala & Mturi (2008) pointed out that alcohol use could also fuel the HIV epidemic by increasing risky sexual behavior. They quote two studies in this regard. The first, carried out in Rwanda by UNFPA, found that aged youth between the ages of 15–24 who consumed alcohol were less likely to abstain from sex. The second study of young adolescents in Jamaica showed that youth who had experimented with alcohol were 2.4 times more likely than those who had not consumed alcohol to say they had unprotected sexual intercourse (Khasakhala & Mturi (2008). Similarly, other studies by LeBeau, *et. al.*, (1999) and UNICEF (2006) alcohol was found to encourage multiple or concurrent partnerships by clouding judgment, removing inhibitions, and reducing concern about HIV infection.

Poverty also attributed to high-risk sexual relationships as revealed in a study by Bachmann & Booyesen (2002). They found that young people who grew up in poor conditions have little access to schools and few prospects for their future. Fetters, Mupela, & Rutenberg (1998) agree and state that due to poverty, some young people lack recreational facilities and thus sex becomes a way to pass time. Schwarz (2003) found a similar trend in Namibia, where it was established that poverty was the main contributor of sex as compensation. For instance, lack of access to other forms of entertainment or pleasure, may make sexual relationships the only affordable “pastime” for many young people.

The literature above illustrates how, to a great extent, male youths’ behavior are shaped by the socio-cultural practices in which sexuality and masculinity is constructed. In relation to my study, the above literature helped me to understand how socio-cultural practices contribute to the construction of young men’s sexual and masculine identities and how this may shape their conceptions of risk and vulnerability toward HIV infection. This work also enabled me to understand the field into which my study will hopefully contribute.

Chapter 5 Research Design

5.1 Introduction and Methodological Orientation

This research aimed to gain an understanding of the socio-cultural practices that shape male youth's masculinity and conceptions of risk in relation to HIV infection. Guided by Henning, Van Rensburg & Smith (2004); Ulin, Robinson, Tolley & McNeill (2002) and Patton (2002), the researcher aimed to explore how youth interact with each other, how they perceived the world around them, and the patterns of shared understanding and variations in the context of an HIV and AIDS epidemic.

A qualitative approach seemed most appropriate as it enabled me to explore and understand the social and cultural meanings and practices underlying the attitudes, beliefs youth hold about gender, sexuality, and masculinity and how these shape their conceptions of risk and vulnerability to HIV infection. According to Denzin & Lincoln (in Ponterotto, 2005:128) qualitative research refers to a broad class of empirical procedures designed to describe and interpret the experiences of research participants in a context-specific setting. It is defined by Creswell, Miles & Huberman and Morgan & Smircich (in Andrade, 2009) as a process that investigates a social human problem where the researcher conducts the study in a natural setting and builds a whole and complex representation by rich description and explanation as well as a careful examination of informant's words and views. Paton (in Merriam (2002:5) explains that qualitative research is an effort to understand situations and interactions in their uniqueness as part of a particular context. The key to understanding qualitative research lies with the idea that meaning is socially constructed by individuals in interaction with their world (Merriam, 2002:3). She points out that the world, or reality, is not the fixed, single, agreed upon, or measurable phenomenon that it is assumed to be in positivist, quantitative research (Merriam, 2002:3). According to her, qualitative research attempts to understand and make sense of a phenomenon from the participant's perspective; an approach appropriate for my study that sought to understand male youth's conceptions of masculinity and the social and cultural practices which shape their notions of and vulnerability to HIV and AIDS.

Within this qualitative framework, an interpretive approach was most appropriate. Schwandt (1994:118) states that this approach provides a deep insight into "the complex world of lived

experience from the point of view of those who live it.” Interpretive research assumes that reality is socially constructed and that the researcher becomes the vehicle by which this reality is revealed (Cavana, Delahaye, & Sekaran, 2001). Guba & Lincoln (in Antrade, 2009) point out that the interpretive researcher’s ontological assumption is that social reality is locally and specifically constructed by “humans” through their action and interaction. According to Merriam (2002:4) interpretive qualitative approach, first, is concerned with the researcher’s interest in understanding what those meanings and interpretations are for the participants at a particular point in time and in a specific context. Based on this, as a researcher, I strove to understand the male youth in the social context in which they made meaning of their lives. Second, this approach focuses on the researcher as the primary instrument for data collection and data analysis. Lastly, the product of this study is richly descriptive and is in the form of quotes from participant’s interviews rather than numbers; given that the study was interested in participants interpretations at a particular point in time and in a particular context.

5.2 Site and Sample

The Schools

The study was conducted in Rundu Urban Constituency. The site was purposively selected because of its high HIV prevalence rate compared to other constituencies in the region (see context of the study in Chapter 1). Rundu Urban Constituency, from where the urban school sample was drawn, is an urban area with an estimated population of 20 700 (National Planning Commission, 2011) and surrounded by informal settlements (see context of study above).

Using purposive sampling, males between the ages 17-20 from Grades 11 and 12 were selected from two senior secondary schools in the constituency referred to as Zion and Yatwe³ in the study. Zion Secondary School has 637 learners while Yatwe Secondary School has 1165 learners. The secondary schools admit learners from all tribal groups in Kavango region as well as the whole country. My purpose was best served by focusing on male youth aged 17 -20 years and those who were residents of Rundu Urban Constituency. Selecting this cohort enabled me to observe group dynamics, ascertain individual and group thinking and obtain some idea about normative behaviors of young men in this community.

³ These are pseudonyms

The Participants

Johnson & Christensen (2004:199) define sampling as the procedure to select a subset from the population. The types of sampling which are mostly used in research are probability (random) sampling which is mostly used in quantitative research and non-probability (purposive) sampling which is used in qualitative studies (Higginbottom, 2004:13). She points out that the selection of the type of sampling to be used in a study has to be based on the methodology selected and the topic under investigation, not by the need to create generalizable findings (Higginbottom, 2004:12).

Therefore, purposive sampling was employed to identify individuals who would provide the needed information based on the research question. Purposive sampling is an approach defined as ‘intentionally selecting specific cases that will provide the most information for the question under study’ (Kemper, Stringfield, & Teddlie, 2003:279). According to O’Brien, Bayoun, Davis, Young & Strike (2009:626), this approach seeks to minimize sample size by selecting individuals who might best contribute to answering the research question. This study attempted to understand the social and cultural practices which shaped male youth’s masculinity and conceptions of risk and vulnerability to HIV and AIDS in Rundu Urban constituency; making purposive sampling appropriate. This type of sampling allowed me to select participants best placed to respond to the questions posed in the study. Gender, age and geographic location were criteria applied in the selection. As Maxwell (2008:235) points out, purposeful sampling can be used to achieve representativeness or typicality of the settings, individuals, or activities selected. He argues that a small sample that has been systematically selected for typicality and relative homogeneity provides far more confidence that the conclusions adequately represent the average members of the population than does a sample of the same size that incorporates substantial random or accidental variation (Maxwell, 2008:235). In addition, selection was based on the notion that I would be able to adequately capture the heterogeneity in the population. This according to Maxwell (2008:235) would ensure that the conclusions adequately represent the entire range of variations rather than only the typical members or some subset of this range.

Sampling occurred sequentially and in two phases. The first phase included identifying 12 male youth to participate in focus groups that I detail later on. Criteria for selection included (a)

voluntary participation, (b) 17-20 year old males, and (c) permanent residency in the area where the research was conducted. The focus group data did not only provide important information from a larger sample, but also served as a sampling tool to identify respondents for individual interviews.

Eight youth (four participants from each focus group discussion at each of the two schools) were identified for individual interviews. In the end though, seven (three from Yatwe Senior Secondary and four from Zion Secondary School) participated in the individual interviews. Criteria in the selection of individuals included but were not restricted to (a) representation of interesting (and divergent) views and the researcher's experience in focus group discussions, and (b) age.

5.3 Data Collection

Since the main study was qualitative and interpretive, data collection was primarily through individual semi-structured interviews and focus group discussions (FGD). Focus group discussions preceded the individual interviews for the reasons articulated in 5.2 above.

Focus Group Discussions

FGD was the first method of data gathering. Each FGD was preceded with a short scenario (see Appendix D) that was used to prompt discussions. Focus group discussions were used to gain insight into participant's constructions of masculinity (and sexuality) in the community, perceptions of HIV, vulnerability to the pandemic and as socio-cultural practices that shape understandings of HIV. Kitzen & Farquahar (2001) emphasize that the use of focus groups is appropriate to unpack the social construction of sensitive issues, uncover layers of discourse and group taboos, and the routine silencing of certain views and experiences. Focus group discussions are especially suited for sexuality research because they enable social interaction and collective analysis of group concerns, information, knowledge and practices (Kitzinger 1994:159:166). An additional advantage mentioned by Bloor, Frankland, Thomas & Robson (2001) and relevant to my objectives, is that focus groups afford the researcher privileged access to in-group conversations which often include everyday language and indigenous terms, thus enabling me to observe performances of masculinity and identity within the group.

Focus group discussions were held after school at the respective schools so as not to disturb the schools' daily routine. An important consideration in this regard also included the nature of the topic and the need to establish an environment in which participants were comfortable to speak freely. Conducting these interviews after school enabled the researcher to create a less formal environment as well as allow for voluntary participation.

I conducted two rounds of focus group discussions with the same group of learners at each school with each lasting approximately one and half hours. I facilitated the process and used a flexible interview schedule (Appendix C). The interview schedule included questions related to male youth's experiences of their masculinity, relationships, sexuality and HIV and AIDS.

Individual Interviews

Participants were purposefully selected from the FGD's for face to face interviews at the two schools. Patton (2002) suggests that interviews provide researchers the opportunity to know what is in the participants' mind and to capture their perspective about the issue under discussion. Cohen, Manion & Morrison (2007:349) pointed out that interviews enable participants whether they were interviewers or interviewees to discuss their interpretations of the context in which they lived and to express how they view situations from their own point of view.

The interviews consisted of two rounds of semi-structured individual (face-to-face) interviews with each participant. As Flick (1998:76) notes, semi-structured interviews allowed respondents to express themselves more openly than in a structured interview, reflecting the respondents' own thinking and feelings.

Each individual interview lasted approximately fifty minutes. I had a flexible interview schedule (Appendix C) for both interviews. The first round of semi-structured interviews involved questions about participants' life history, which gave me an understanding of the major influences shaping their *habitus*. This interview also helped me to know them better as well as make them comfortable as we undertook the interview journey. It also helped me to understand how their beliefs with regard to gender roles, sex and sexuality were mediated in socio-cultural contexts which might render them vulnerable to HIV infection.

The second interview focused on the selected male youth's conceptions, perceptions, beliefs, and attitudes towards HIV as well as the social and cultural practices shaping sexuality and masculinity in that community. Here I was also interested in the discourses that circulated in the community about being a man and how these on the one hand, mediated male youth's experiences of themselves as men and on the other hand shaped their conceptions of risk and vulnerability toward HIV infection. Participants were provided with two scenarios as prompts to begin discussions (see Appendix D).

Both individual interviews and focus group discussions consisted of questions on three main topics: socio-cultural practices, youth's sexuality and masculinity, and HIV and AIDS. The interview questions were open-ended in order to foster participants' descriptions of their own experiences and perspectives. All interviews were conducted in the local language (Rumanyo) and in English. All interviews were recorded with a voice recorder. Field-notes were kept to facilitate the process of self-reflexivity. As far as possible, in the results, I presented the quotes with few⁴ or no changes to preserve authenticity.

5.4 Data Analysis Process

Anderson (2000:132) compares data analysis with "moving into new apartment...with a bunch of boxes and [one] must decide what goes where and why." De Vos, Strydom, Fouche & Delport (2002) define qualitative data analysis as the means to get a sense of the whole process by first reading through all transcripts and jotting down ideas. According to Mouton (2005:108) data analysis involves the breaking up of data into manageable themes, patterns, trends and relationships each with the aim to understand the key elements of the data. De Vos, *et. al.*, (2002) point out that qualitative data analysis is primarily an inductive process of organizing the data into categories and identifying relationships among the categories. It is a process of bringing order, structure and meaning to the mass of collected data (De Vos, *et. al.*, 2002).

In qualitative research, the researcher studies the selected issues in depth and attempts to understand the categories of information that emerge from the data (TerreBlanche, Durrheim &

⁴ Grammatical errors were corrected for ease of the discussion. I used square parenthesis to denote this in each case in the quote.

Painter, 2006). Cohen, Manion & Morrison (2007) point out that when the interview data have been collected, the next stage involves analyzing the data by using a form of coding or sorting.

In this study, I participated in data collection with the intention to understand the conceptions and experiences of participants from their perspective. Recorded FGD and individual interview sessions were first, listened to and transcribed by the researcher. The Rumanyo transcripts were then translated into English. To make sure that the English translations of the Rumanyo transcripts had the same meaning as the data collected in the voice recorder, a process of back-translation was followed. This involved translating all the English translated transcripts back into Rumanyo and comparing this translation with the original to ensure their accuracy. As far as possible, I translated the text verbatim into English. However, this was not always possible due to the difference in language structure and meaning. The consequence was that sometimes, but not often, I changed the sentence structure to accommodate the nuances in the two languages used in interviews. While this may have been the case, and as a result of the back translations, the essence of the meaning was not compromised.

I read through the transcripts repeatedly and identified main topics themes that I further grouped into categories. The transcribed data was then analyzed by using the constant comparative method developed by Glaser and Strauss in 1967 (Merriam, 1998). This method is an analytical approach used in grounded theory studies and has been adopted by many researchers who are not seeking to build substantive theory (Patton, 2002). This is "because the basic strategy of the constant comparative method is compatible with the inductive, concept-building orientation of all qualitative research" (Merriam, 1998: 159).

The constant comparative method entails an inductive process of meaning-making (Henning, Van Rensburg & Smit, 2004). This was done by assigning code words to a line, a sentence or paragraph of the transcribed data as a first step, and data coded and recoded by constantly comparing incidents. The coded words were thereafter grouped or categorized provisionally around a particular concept. Units of meaning were then identified and compared with provisional categories. Where units of meaning didn't fit a provisional category, new categories were developed, and the category and its subcategories was then linked to develop main

categories or themes (Merriam, 1998; Merriam, 2002). After reading and gathering the information belonging to the same category, the researcher began writing up.

The method of analyzing the data from the individual interviews as well as from the focus group discussions to form categories is referred to by Walsh (2001:69) as 'triangulation.' He refers to triangulation as using multiple methods of data collection to eliminate the weakness that exists in different methods. The methods thus complement each other as researchers are able to look at their study from different angles. Similarly Maxwell (1996:76) states that the combination of focus group discussion and individual interviews enables the researcher to draw inferences about participant's meanings and perspectives which could not have been possible if individual interviews were the only instrument of investigation.

5.5 Reliability and Validity

Reliability and validity has been raised as a threat in qualitative research; especially how the researcher will prevent bias and his/her effects on the setting or individuals studied. These threats were dealt with by the researcher during the data collection and analysis by not distorting the data collected and imposing my own theory, values, or preconceptions. Maxwell (2008:243) points out that the main concern is not with eliminating variance between researchers in the values and expectations that they bring to the study but with understanding how a particular researcher's values influence the conduct and conclusions of the study.

According to Hess (in Maxwell, 2008: 243), validity in qualitative research is the result not of indifference, but of integrity (personal communication). In order to avoid the distortion of the data, I used triangulation by collecting information from a diverse range of individuals and settings, using a variety of methods. I recognized how my personal perspectives as a male (and adult) could influence the research process. I was also aware of how these may influence my interaction with participants. To minimize bias and as already articulated earlier on, I used scenarios to introduce discussions. This accorded me with some distance and also enabled participants to first reflect on perceptions and only thereafter provide examples in their own lives. Triangulation also allowed me to cross-check the data and to increase validity of my research.

In conclusion, the reliability and validity of this study, given its limited scope and aims, and the resources and time at the researcher's disposal, seems adequately addressed. However, the iteration process of feeding the findings back to the participants for comment was not attempted, and therefore no claim can be made as to their accuracy from the participant's perspective, which in qualitative research is the acid test. This, I acknowledge as a weakness in this study.

5.6 Research Ethics

Due to the sensitive nature of the research topic, ethical considerations were accorded the highest priority during the data collection stage. Therefore, the data collection protocol was reviewed by both the supervisor and the researcher. I obtained a letter from the Head of Department at Rhodes University which sought permission from the Rundu Educational Office (REO) and thereafter from the principals of the two participating schools to conduct the research. The letters informed the latter about the study after the REO had given permission for the research study to be conducted at the two selected schools.

Potential candidates that met the required demographic criteria were approached and written consent was sought from each participant. All participants were informed of the objective, process, and relevance of the study. When the purpose of the study had been explained, and questions and concerns dealt with, the participants were asked if they were still willing to participate in the study. Those who agreed were asked to sign an informed consent form, which contained a brief explanation of the study and the statement of agreement to be part of the study. Participants were informed that they could withdraw from the study any time, if they so wished.

All the interviews took place after school at the school to allow for private conversation without interruption. Participants were also guaranteed utmost confidentiality, something the researcher felt was very important considering the sensitive research topic. The participants were reassured that all that will be discussed during the interview would only be known to the participant, the researcher and the supervisor. They were also informed that privacy and anonymity will be provided to protect their identities and would not at any stage appear in any of the study documents. To this end pseudonyms were assigned to each participant. Throughout the data

analysis phase the participants were referred to using these names. In the case of the schools, I gave them names (Zion Secondary School and Yatwe Secondary School) to maintain anonymity.

5.7 Researcher Reflexivity

Reflexivity is defined by Horsburgh (in Lietz, Langer & Furman, 2006:447)) as “active acknowledgement by the researcher that her/his own actions and decisions will inevitably impact upon the meaning and context of the experience under investigation.” According to MacBeth (in Lietz, *et. al.*, 2006:447) reflexivity involves deconstructing who we are and the ways in which our beliefs, experiences and identity intersect with that of the participant. Similarly Guillemin & Gillam (2004:274) state that reflexivity is an active process that requires scrutiny, reflection, and interrogation of the data, the researcher, the participants, and the context that they inhabit. They argue that reflexivity is a process that occurs throughout the research (Guillemin & Gillam, 2004). By reflecting on the process of research, and expressing this within the research writing up process, one can begin to assume that reflexivity was attained. For example, when analyzing the texts, I not only looked closely at the language used by the participants but also at my contribution to the interview via language use and assumptions. The following were also aspects I reflected upon in my role as researcher.

Age and Profession

Conducting the interviews was quite an eye-opening experience. I was surprised that most of the participants appeared relaxed to express themselves even when engaging in discussion about sexuality. The freedom of expression could have been because a scenario, which put the participants at ease, preceded the interviews. This may also have had to do with interviews conducted at a venue and time that was conducive to the participants and decided upon by them. Another reason could be that they could relate easily with me as a man. I introduced myself as a student at Rhodes University, who needed help (information) for my studies and brought myself to the level of their understanding because it is not easy for young people to talk with elders about sexually related topics. In addition, the fact that participants were given a choice to respond in their mother tongue could have played a role in establishing the relaxed mood.

I had expected that being a teacher and the age difference (between participants and me) would have some sort of effect in the way the participants would react to the interview questions or me. However, this fear was allayed since they didn't know my actual profession apart from being a student at Rhodes University. I noted in my field-notes that there was no evidence of discomfort or inhibition from the participants. Given the views that the majority expressed regarding masculinity, gender and power relations and the generally chauvinist attitudes towards sexuality, I was amazed by this seeming openness and relaxed mood.

3.8 Limitations of the Study

A number of limitations should be kept in mind when interpreting the results of this qualitative study. While purposive sampling was used to select participants who represented a variety of opinions, the full range of views and beliefs may not be reflected. In addition, discussions around sexuality and HIV/AIDS are considered private and sensitive in the part of the country where the study was conducted and as such, accurate information might have been difficult to obtain. Based on the fact that some interviews were conducted in the participant's mother tongue, many of the terms, phrase and expressions might have lost some of their more nuanced and ambiguous meanings when translated into English. In addition and while the researcher is proficient in both English and the local language, there might have been instances where questions asked could have been misinterpreted by participants upon translation and when the researcher translated the participant's response during the transcription of the collected data. Another challenge may be related to the English language proficiency of some participants, despite being given the option to speak in their home language.

Although for the purpose of this study, a sample size of 12 participants is appropriate for the scope of this study; its generalizability is limited since the sample of participants does not necessarily encompass the general views of young men in the entire constituency and region. In addition, while the participants were free and open during the interviews, the age differences of the interviewer and the participants as well as the researcher's position in the community might still have set limits to participants' responses. Lastly, there may also be a tendency to withhold information on sexual activity among youth in a context where community taboos prohibit and/or discourage premarital sex.

Despite these cautions, the current study provides information about the socio-cultural practices that shape male youth's conceptions of risk and vulnerability to HIV/AIDS within an under-researched region, and the findings can be used to guide future research and intervention efforts.

3.9 Significance of the Study

According to the HIV and AIDS statistics released by the Ministry of Health and Social Service (MoHSS) in October 2010, the highest HIV prevalence in Kavango region was reported from Rundu state hospital in Rundu Urban constituency, which was 23.2% while other main hospitals in Kavango region like Andara, Nankudu and Nyangana, reported rates at 19.2%, 13.5%, and 12.8% respectively (MoHSS, 2010). This result also indicated that the national HIV prevalence rate was 18.8% among those aged 15-49 years and despite a low HIV prevalence at national level, the number remains relatively high compared to the international rate which is reported to be at 0.8 % (UNAIDS, 2010).

These statistics created the impetus for the study focus; its location and area of study. The main aim of the study was to investigate the social and cultural practices that shape male youth's conceptions of risk and vulnerability towards HIV and AIDS infection.

The result of this study will provide some insights and information how socio-cultural practices played a role in shaping young men's conceptions in order to conform to the *habitus* of the context (field) they live in terms of their identity as man. It will also serve as basis for programme developers to consider developing programmes, which targeted community members and traditional leaders to address some cultural beliefs, which continued to promote hegemonic masculinity.

CHAPTER 6 Presenting the Results

6.1 Introduction

This study examined the socio-cultural practices that shape male youth's conceptions of risk and vulnerability to HIV/AIDS in Rundu Urban Constituency of Kavango Region, Namibia. What follows below are the results derived from focus group discussions and individual interviews with twelve male youth aged 17 – 20 years from two schools in Rundu Urban constituency. As indicated in Chapter 3, six participants were selected from each school to participate in the focus group discussion and from these, four participants from the first school and three from the second school agreed to take part in the individual interviews.

The chapter represents a synthesis of the data using themes and categories that emerged. Four key themes (which form the organizing framework to present the results) were identified namely normative masculinity and manhood, gender & power relations, sexuality, and risk & vulnerability to HIV infection.

The perspectives of participants in the study seemed to overlap considerably and thus, the themes and categories are used for analytical purposes, with an understanding of their intersectionality.

There were high levels of consistency and agreement between the participants on almost every theme. The most compelling example was agreement by all participants of what defined a 'real' man in their community. In their view, a real man in the community was defined as one who had a family of his own (a wife and children), a house and often, one who may have multiple partners.

This chapter begins with a profile of each participant who participated in the individual interviews. I do this to provide some distinctive features that contributed to individual perspectives and as a result, highlight some structures that shaped the *habitus* of the participants in this study. Significant in these profiles, as I show later on, are the similarities in the early childhood structures that shaped their *habitus*'s. For this reason, rather than reporting factors shaping individuals, I follow the profiles with the main findings by adopting a thematic approach

that integrates data from the focus and individual interviews. In so doing, I organize the main results by presenting them in themes and categories.

6.2 Introducing the Participants

Focus Group Participants

Focus Group	School	Participants ⁵
1 ST & 3 RD	Zion Secondary School	Zwakile, Zama, Sakalo, Sondaha, Ngato and Xulu
2 ND & 4 TH	Yatwe Secondary School	Shamurume, Zungu, Musiga, Vashe, Kulutwe and Twakalire

Individual Interview Participants

Shamurume was born at the public hospital in Rundu. He has seven siblings: five brothers and two sisters. A brother and sister passed away, leaving only five of the siblings still alive. He is the third child in the family. His mother is still alive but the father passed away in 2009. Ploughing is an integral activity that defines his family. He also indicated that respect and support for the family are values held in high regard in his family. According to him, his family also values education. He and his siblings were taught that without education one would not achieve anything or become someone. There are no rituals in the community, which he can remember apart from the Nyemba tribe of which he is not a member. This tribe practices circumcision and teachings of what is expected from a boy. In this tribe, fathers teach young boys to plough, herd cattle and goats while girls are taught by the mothers on the expectations and duties (such as how to behave in marriage and do household chores). According to Shamurume, circumcision was not part of his parent's cultural practice. He stated that these days circumcision is administered in hospital because of its perceived health advantages and not necessarily because of its cultural significance. His role model in his family is his uncle because he was educated, took care of him, and inspired him. He considers him as a father and always seeks advice from him.

Vashe was born in the Kavango region and currently resides in Rundu. He is the only boy in a family with four sisters. His parents were both teachers. His father passed away while his mother is still teaching at a school outside town. The important thing in his family is love, caring for each other, teamwork, and focusing on family development. His family was taught to always have a positive attitude towards life, take good care of siblings, and socialize with different people and learn something from them. He is not aware of any rituals practiced in the community since those, which used to take place faded due to technology. He acknowledged that young boys were circumcised in the past, and girls taught how to behave toward men. For boys the teachings included how to plan for one's future and how to decide on a wife or girlfriend. Vashe feels, with the education received in school, he will refuse to undergo circumcision. He said there is a greater risk of contracting HIV if circumcision is performed a traditional doctor. His family does not support this supposed rite of passage because, he says, they are educated and have adopted a modern way of living. His parents are Christians and thus don't support the rituals which are practiced in the community. His role model is his late father and currently his mother because of the positive role they played in motivating him. He also has role models in the community especially those who are successful and educated.

Zungu has three siblings; all of them male. Both of his parents are alive. Culture and tradition play a big role in how his family identifies itself. His parents believe that culture and tradition guides them in terms of their practices and what should and should not be done in the family. They also believe that if one does not have cultural beliefs and practices, one is like a tree without roots. He and his siblings are taught to consider the importance of family and are expected to have families of their own in the future. This according to his parents, is how the family legacy will be passed from generation to generation. Other aspects considered important in his family refer to what it means to be male or female and the concomitant expectations and duties ascribed to each.

⁵ Participants in bold were those selected for individual interviews

Zungu stated that in the past, girls were separated from the rest of the family once they reached puberty and boys underwent circumcision. However, according to him, circumcision is becoming less common due to modernization. This notwithstanding, such practices may still be found in rural areas, as opposed to urbanized areas where boys are circumcised in hospitals by medical doctors rather than traditional healers. Zungu acknowledged undergoing some of the teachings and being circumcised and feels he did the right thing; especially in terms of his health. His parents are proud that he underwent this rite of passage. He views his parents as role models since they inspire him.

Sondaha was born in Kavango. Currently, he resides in one of the suburbs of Rundu. He has seven brothers and two sisters. His family places emphasis on education because they believe that it is the vehicle to get what one wants in life. Both his parents only went up to Grade 3 or 4 and for this reason, are mostly involved in farming especially, cultivating crops. The family values good behavior and living peacefully with others. While education is highly valued, the reasons for this are two-fold. The first has to do with him and his siblings being able to take care of themselves and the second, the ability take care of his parents once they are educated. He mentioned that boys (including him) in the community mostly are taught how to construct traditional huts, to plough and herd cattle. He has not been circumcised. His role model is his older brother because he is educated and respected in the community.

Xulu was born at Oshakati hospital and currently resides in one of the suburb of Rundu. He has a brother and two sisters. Like the others young men in this study, this family also places importance on education. Caring for one's family and becoming independent are valued in Xulu's family. He and his siblings are taught how to conduct themselves in marriage and not to get involved with friends who do bad things. He stressed that his parents also taught he and his siblings to always do good things (deeds) and become good people. His parents value hard work and obedience, emphasizing too that boys know their duties (ploughing and constructing traditional huts). They also remind the family to listen to advice given by parents and elders. In his community, boys are told to go through (approach) parents when looking for a girlfriend. The common practice is for the mother to approach the girl and her family on her son's behalf.

Xulu's role model is his friend Zimaxolo, whom he describes as humble and someone who always listens to his parents. When Zimaxolo was at school, he did very well and his teachers always praised him. Currently, he is studying at the University of Namibia.

Zwakile was born at Karuci in Kavango Region and currently resides in one of the suburbs in Rundu. His father has five children; some with different wives. In his immediate family, he has a sister. He has three step-brothers from different mothers. The important thing in their family is the bond they have as a family. Like others in the study, education is highly valued in Zwakile's family. It is seen as the vehicle to a better life and a more secure marriage. Young boys are circumcised in his family. If a boy is not circumcised, he will not be considered a man. Zwakile underwent this ritual and feels proud that he did. He had the full support of his parents. He looks up to his father because he is humble and assists other people in the community. He also admires the headmen of the area because he shows respect to everybody in the community; young or old.

Sakalo's father is Rumanyo speaking and his mother is an Oshiwambo speaking woman. Although he was born at Grootfontein where his father worked as a defence force member at that time, he currently resides in Rundu. His father met his biological mother while working in Grootfontein and he is the only child from that relationship. His father and mother separated and after their separation, his father took him to live with his stepmother in Rundu. His stepmother also had children prior to marrying his father. They had children together as well. His stepmother raised him together with his step- brothers and sisters. He stayed with them until his father passed away. He does not have any brother or sister from his biological brother. One of his stepsister's is a teacher while the stepbrother does not work. The important thing in their family is to prove that one can do something; to take the lead and not always be in the background. They were taught also to support each other and as men, become breadwinners. He has to advice his siblings especially now that he is in Grade 12 to do the right thing in life. Boys in the community undergo

teachings on expectations and duties and are also expected to be circumcised. He didn't go through the traditional circumcision process but instead decided to undergo circumcision at the hospital last year. He is proud that he did. Some boys in the community support being circumcised, while others don't. His family does not support the practice since they consider it to be from another tribe and not something Rumanyo speakers would encourage. The reason for his decision had little to do with circumcision as a cultural practice. Rather, he did it after learning about its health advantages associated with circumcision.

Sakalo's role model is his late father because he was kind and tried to take care of all his relatives especially those who were destitute. He also admires the headman of the area because he always tries to root out criminal activities in the community and is hardworking.

In summary, the individual profiles reveal that boys and girls in this community⁶ were assigned different roles based on their gender. Boys, for instance, were taught and expected to do 'manly' duties such as ploughing, herding cattle and goats while girls were expected to perform household chores. Other teachings girls received from their mothers is how to behave towards men in marriage. Strikingly amongst this cohort, all the families accorded education primary importance in terms of better life and marriage prospects. Two of the participants (Zungu & Zwakile) proposed that their families also valued cultural practices as the cornerstone of their family existence. Their families held rituals, such as circumcision, in high regard as they were considered stepping-stones to 'manhood'. Marriage was also considered important as it contributed to the continuation of the family existence. In contrast, the other five participants' families were not deeply rooted in rituals such as circumcision; although they also underwent certain teachings about what was expected from boys.

6.3 Social and Cultural Practices shaping Sexual Identity and Masculinity

6.3.1 Introduction

The section below presents the integrated findings of the study. I begin by describing what this cohort of youth put forward as social and cultural factors shaping their *habitus* (beliefs, norms and values). These include normative masculinity and manhood; gender, negotiation, and power relations; sex, sexuality and risky sexual behavior; and risk and vulnerability to HIV infection.

⁶ I recognise the complexity, multiplicity, and non-singularity of the term, 'community'. I also acknowledge that participants in this study draw on a multiplicity of influences to understand and constitute sexual and masculine identities and by implication, consider risk and vulnerability toward HIV and AIDS. This notwithstanding, I limit the use of the term to denote the geographic and discursive space that the cohort shares and thus refer to community (and a collective *habitus*) rather than attempt to illustrate how individual *habitus*'s were formed and how each shaped constructions and understandings of sexual and masculine identities and their interrelationship to HIV and AIDS.

As I argue in the following chapter, these were reported to shape youth's conception of risk and vulnerability to HIV and AIDS.

6.3.2 Normative Masculinity and Manhood

Perhaps one of the fundamental conclusions in the data is that constructions of masculinity amongst this cohort of the participants are deeply and essentially embedded in constructions of a normative masculinity in the community. In other words, answers to the question of 'who am I as a man?' appear to rest on the broader question of 'who am I as a man according to the social and cultural practices in my community.' Amongst this cohort of male youth, normative masculinity constructions included a man being able to take care of his family, being in a heterosexual relationship, getting married and the ability to father a child. For example, participants in the two focus groups regularly spoke of the 'ideal' man as virile and heterosexual. This ideal was what they aspired toward; a key indicator that shaped how they regarded themselves as men. Participants highlighted the practices that I detail below as those contributing to particular constructions of masculinity in their community, indicating that for the most part, they experienced pressure to conform.

Reproduction and Being a Man

Being able to father a child was viewed as a primary marker of being a man in the communities in which this cohort was drawn. The following narratives depict the characteristic responses from the participants of both the focus group and individual interviews. When asked to describe when someone is considered a man in the community, Zwakile in the first focus group said, *[I]n the community they say someone who has kids, who can reproduce is a man" (ZFGD1, 09/02/2012).* In another focus group, Twakalire supported this claim by stating "... *in the community to be considered a man you may have a girlfriend but if you won't produce children, you will never be considered a real man. They might say that he is nothing; he cannot produce children so he is not a real man. You have to prove them wrong that [you] can reproduce; [you] have the characteristics of reproducing" (YFGD1, 11/02/2012).* Sondaha who was also in the first focus group, put it this way, *"There are some boys who say when their friend impregnates a girl that he is a man because if he dies he will not go through the traditional ritual of having charcoal put*

between his buttocks [for not having a child]. They praise him that 'yes', you are a real man" (ZFF1, 25/02/2012).

It would seem that the expectation described above (and ability to produce a child) was more complex as it was intertwined with parents anxieties and expectation. Not only were parents anxious about the masculinity of the male-child, but they also expected and desired to have grandchildren. As participants in the individual interviews and focus group discussions intimated, parents would express concerns of what the future would hold for their male child should they be unable to produce children. Zwakile put it this way, “[T]hrough impregnating a girl, you have proved your manhood. Your parents will be proud of you because they were not sure that one day you will also be able to produce children” (29/02/2012). The consequence, as some participants indicated, male youth showed their virility by having children before they are ready to not only take care, but also marry the mother of the child. If one were unable to have a child, as Musiga from Yatwe Secondary school indicated, parents would assume that there was something ‘wrong’ with their male child. He said, “I think some will think that maybe their son is been bewitched so that he cannot have that desire to propose to girls and [parents] will end up taking that kid to a sangoma [traditional healer] so that he can be treated [with] fruits or some herbs so that he can regain his feelings” (11/02/2012).

Not only do parents pressurize males to ‘give them grandchildren’, but one’s status in the community as a man is called into question if one does not have a child. Sakalo from Zion Secondary School stated, “[L]ike a man who does not produce even, if you have a wife but you cannot produce children, your parents will expect grandchildren. If nothing happens (no children), other people in the community will start doubting your manhood after waiting for you to produce a child; they will see you as not important” (01/03/2012). Along the same vein, Sondaha said, “These days people believe that every person must have kids, you know. Like in our tradition, people say you must have as many kids as possible-as you can so that they can help you to work in the plantation or farm. Some grandmothers believe that if you have more children you are rich” (ZFGD1, 09/02/2012).

This cohort was conscious of how these descriptors and how a normative construction of masculinity put men under persistent pressure. If, as a man, one acted outside the norm, one's identity and worth (as a man) was called into question.

Masculinity and Material Possessions

Together with the ability to produce children, the ability to own property (in many forms) and possessions were yet other attributes that identified one as a man in the communities from which the participants were drawn. Shamurume from Yatwe Secondary school explained that, “[A] *man in my community, they refer to someone who has a house, who has built a house, have cattle, a family and children, plough fields. By having these attributes, one is regarded as a man. If someone doesn't have these things mentioned and he is not working or educated, people in the community will just call that person a human being and not a man. They believe a man is someone who has cattle, a house and a family (wife and children) of his own*” (YFF1, 14/02/2012). Zwakile from Zion Secondary school had this to say in regards masculinity and material possessions, “[I]n the community they say someone who is working, who has kids, his own house and is able to take care of the others: that is what is called a man” (ZFGD1, 09/02/2012). Zungu from Yatwe Secondary school highlighted self-reliance and its relationship to material possessions in identifying ‘a man’ in the community. He said, “[W]hen one becomes self-reliant. I mean [when] you are able to take care of your own in whatever way ... let us talk about having established your own house and have your own wife: that is the time that you are considered to be a man in my family” (YFF1, 07/03/2012).

The responses above suggest that being a man in this community closely related to the ability to be self-reliant and being a provider. However, as the next section shows, it also included the number of partners.

Multiple Partners and Masculinity

Together with the above, participants often drew on the notion that it is normal (and expected) for men to have multiple sexual partners. When asked how a boy or man was viewed by his peers if he has many girlfriends, they stated the following. Zama from Zion Secondary School's second focus group stated, “*Like today's life. we will praise him (if he has more than one*

girlfriend), that he is a Lyala (real man in a local language)” 18/02/2012). In support of Zama’s view Kulutwe said, “... in the community, if a man has many partners [he] will be respected by [his] friends. However, he made the point that “[E]lders [would not usually] be happy because they would consider you to be adulterous. Some of your friends will be jealous although others will praise you. Once you are praised you will feel proud and continue do have more partners” (ZFGD2, 18/02/2012). Another participant from the same focus group added, “[T]hese days most of the people, the majority of guys, have more than one partner; Why? Because they like, to show others that ‘I am also a man, I can go for any woman my heart desires’” (Twakalire, YFGD2, 13/02/2012).

This cohort of male youth indicated that men who do not adhere to the ideals of masculinity privileged by the community were put under the microscope. Those men who did not show ‘adequate’ interest in women by having several sexual partners or who only had one sexual partner were assumed to be ‘bewitched’, as was the case when men did not produce children. They were viewed as ‘different’; requiring interventions from the community to become ‘normal.’ During the focus group discussions, some participants explained how the community would consider a man who was involved in a monogamous relationship. Ngato stated, “[I]n the community there are some parents who, when they see that their son only has one girlfriend or wife, will say, ‘no, maybe the reason why he only has one girlfriend is that he is bewitched’. That is how they (parents) believe” (ZFGD2, 13/02/2012). Kulutwe from the same focus group added, “[E]specially these days, what happens is like, they will see someone having one girlfriend and to them they will take it maybe that girl or wife did something to her husband (or boyfriend). Maybe she went to someone like a sangoma (traditional doctor) to get treatment to make that boyfriend stay with her only (and) not have any desire other women” (YFGD2, 13/02/2012).

The findings above provide one level of evidence of the social practices that male youth experience pressure to conform to dominant masculine norms assigned by different sectors of the community (such as parents, peers and other members of the community). To qualify as man or prove one’s masculine prowess, a man needs to produce children, own material possessions and have multiple partners. Youth though, also indicated the influence of peers in how they understood themselves as men, as the next section highlights.

Peers and Masculinity

During the focus group discussions, participants indicated that peer pressure played a role in influencing boys to get involved in sexual activities or to get a girlfriend. They said that this happened because of a belief that a boy cannot grow up without having a girlfriend. Boys who do not show interest in girls are suspected to be lacking sexual feelings for the opposite sex. Zwakile said, “[I]t is peer pressure from friends that leads to many boys to have such an idea (of having a girlfriend), which is not a good idea at all. In reality, this belief is a traditional belief, which is in males or boys. Those who are not interested in girlfriends end up to be called names such as gay or moffie (sissy). When it comes to high school life, if they see you that you are not dating, they will start giving you names just to provoke you” (ZFGD1, 09/02/2012). Similarly, Sondaha from Zion Secondary School pointed out, “[I] think that boys are pressurized by friends to get a girlfriend to be like them. Every time when they sleep (with a girl), they tease each other. They say about those without girlfriends [that] their penises don’t erect or kind of and they don’t have feelings for girls. This, therefore, encourages boys to prove to friends that they also are ‘men’ or boy who can love girls” (ZFGD1, 09/02/2012). Sakalo, agreeing with his friends added, “[B]oys normally know it is wrong to have a girlfriend very early, but in order to be accepted by the group, they do it. Everyone wants to be cool [and] that is why most boys do it just to keep the friendships or to make their friends happy” (ZFGD1, 09/02/2012).

Cultural Beliefs and Masculinity

Participants cited cultural beliefs as some of the reasons why boys or men seek sexual partners on one hand and more than one sexual partner on the other hand. According to them, those without sexual partners were seen as not man enough or they didn’t have the courage to proposition girls. When asked what they thought of a boy without a girlfriend, Zwakile from Zion Secondary school responded, “[S]ome might conclude that you are not a good boy or they will say you are gay or a moffie because people in the community have different beliefs and cultures. In our tradition, as a Nyemba, for me in reality, if you reach the age of 20 and you are not in school and you don’t have a kid or girlfriend, people in the community will obviously say that you are useless” (09/02/2012). During the same discussion, Zulu intimated, “[W]e believe that a boy cannot just grow up without having a girl or without having sex; others will just laugh at you. This belief or people in the community even elders will just say that this is a poor guy.

The belief still continues even today because both elders and young people (boys and girls) will laugh at you” (09/02/2012). In a different focus group, Twakalire from Yatwe Secondary School pointed out, “[I]n the community if you [do not] have a girlfriend these days, they will say you are not man enough because you cannot get a girlfriend for yourself or you cannot proposition a girl - then they will say you are gay. They will even start to discriminate [against you], which will result in you to do something wrong (getting a girlfriend)” (YFGD1, 11/02/2012). Kulutwe suggested, “[S]ometimes they might regard you as an ‘abnormal’ person because people in the community believe that human beings have feelings and it is only those without feelings who cannot have girlfriends or who can’t and don’t proposition girls. Community members say that it is abnormal not to have a girlfriend and they might go to the extent of approaching a traditional healer for treatment. Even the parents will not be happy about it; they will think that there might be something wrong with their child for not proposing girls” (YFGD1, 11/02/2012).

Male youth in this study reported to experience the pressure to conform to the norms in the community for fear of being labeled ‘abnormal’ or ‘unmanly’. Through their practices, it seemed that both elders and peers alike reproduced and reinforced norms that potentially predispose youth to HIV infection since male youth were ‘expected’ to bear children and have sex (often with more than one partner).

Marital Status and Masculinity

While this cohort suggested that cultural beliefs played a role in encouraging male youth to have several sexual partners as a marker of a man in the community, participants during the focus group discussions and some in the individual interviews were also of the opinion that marriage was a critical factor in the determining who was called ‘a man’. Unmarried men were said to not have feelings and were labeled as impotent, stingy or ‘diseased’. Participants highlighted that they would be the laughing stock of the community if they did not have partners or in the future did not marry. Xulu from Zion Secondary School said, “[T]hey will of course laugh at you and say that you don’t have feelings. This can come from both elders and young people (boys and girls). Sometimes, a girl might fall in love with you. She will just try to approach you and if you fail to respond, then she will spread the news that you are weak and not responsive. She will just make a bad name for you” (ZFGD1, 09/02/2012). Zwakile added, “[S]ome can conclude by

saying that you are a stingy person; you do not like to share your money or that you have with a wife and kids (elsewhere). For this reason, you don't want to get married. They can end up calling you, 'olyo lyo makurulya' (meaning one who is stingy). That is what they will start saying in some communities" (ZFGD1, 09/02/2012). Twakalire from a different focus group narrated, "[T]hey will think that this type of person is not man enough because you cannot [should not be able to] live without a wife. They will say that you are afraid to have a wife because you know that you cannot produce kids so it is better for you to remain single. They might also say that you are not able to take care of a family, you do not have the qualities of a real man that is why you choose to remain single and will be considered not man enough" (YFGD2, 13/02/2012). Similarly Zwakile during the individual interview stated, "[T]hey can call you a man but it is not the way it is supposed to be. For you to be called a man without a wife, they will say you are not a real man" (ZFF1, 03/03/2012).

Men's single status was called into question, with some labeled as women, gay (or moffie) or not a 'real' men. This was especially true if the man was known not to have any children. During the individual interview Sondaha put it this way, "There are some men who don't go close to woman or propose women. This type of man is also called a 'woman' because he cannot 'do anything'. They are disrespected, especially if they are known to never had a girlfriend or a wife. If the man does not consider marriage, that will make people say that he is the same as a woman" (ZFF1, 25/02/2012). The man would still be labeled even if he had children. In this case, people in the community would call such a man a 'player'. Xulu narrated, "This type of person in the community is seen as one of those who are loose (adulterous), people who like to change partners. Today he sleeps with this one, tomorrow he sleeps with a different person, which will make people to think that is maybe the reason why he is not married" (ZFF1, 26/02/2012). Sakalo in support of his peer said, "Even them (unmarried men) are also considered not important because they don't like to have a family and to give something to others or share with others" (ZFF1, 01/03/2012).

While it seemed acceptable for youth and men to have multiple girlfriends before marriage, views were different on married men sleeping around. Xulu summed it up in this way, "... people will think of you differently if you continue to have many girlfriends once you are

married. People will say, 'he is still one of those young boys sleeping around' and will not earn respect" (ZFF1, 26/02/2012). Thus, multiple partners were perceived to be 'normal' for young boys; and disrespectful once someone was married.

Dispositions and Masculinity

Boys or men in the community were required to not only go through certain rituals, but also embody certain characteristics and abilities to characterize them as 'normal men'. These characteristics were said to distinguish them as superior from their 'weaker' female counterparts. Men perceived themselves as physically strong, tough, resilient, responsible, focused, and confident, as described by participants in both the focus group discussions and individual interviews. Zwakile said, "[I]t is someone who is focused; has confidence, high self-esteem and is responsible. If you have a heart that can be influenced easily, then you are not a man because you can be controlled like a kid. A man decides what he thinks is best for him. [So] if you don't decide what is best for you, you will always be influenced by friends; then you are not a man" (ZFGD1, 09/02/2012). Twakalire describing whom he considered a man suggested that, "It is a person who is determined, who believes in himself and does something which he believes will make him successful. A man is not easily influenced by others so if you believe that 'I am doing this in order to achieve something' then you have to fight for it because there is nothing that will stop you" (YFGD1, 11/02/2012). Zungu whose family held strong cultural beliefs (described in his profile earlier on), during the first individual interview stated, "It is when you have undergone all the rituals and the initiations; when you become self-reliant, by taking care of yourself in whatever way. Let us say when you own a house and a wife that is the time that you are considered to be a man in my family." (YFF1, 07/03/2012). For Zungu, what his family considered a man was important.

Zwakile, adding to what he said earlier, distinguished himself from females by stating, "I am strong and that makes me different from a female because even if there is an old person as long as she is a she (female), I am stronger than her. For this reason, I can build a house, go in the bush to get building materials needed for a house, while a female can't do that. [That] makes me very different from a female" earlier (ZFGD1, 09/02/2012). Twakalire from Yatwe Secondary School stated, "A boy in the community is required to know how to plough, look after cattle, go

in the bush and know how to hunt. He is not allowed to sit with woman or girls. No, that is not allowed; if you do that, you are seen as not man enough. As for girls, they must know how to pound (maize), take care of kids at home, cook and do all the house work” (11/02/2012). Similar to what Twakalire stressed, Musiga from the same focus group added, “[G]irls are also required to fetch firewood, collect water and assist making baskets. They have to know how to make the baskets where to put mahangu (type of crop)” (YFGD1, 11/02/2012). Kulutwe from the same focus group concurred with his peers by saying, “A girl is only required to sit, do the home activities, cook, prepare food for the boys and during the season for cultivation, go and weed. Girls should stay at home and not go out to look for a man or boyfriend” (YFGD1, 11/02/2012). During an individual interview, Shamurume suggested, “[T]hey expect a boy or man to take care of himself, his family and even offer help to some community members who need help from him. He has to settle down with a family, which is considered as one of the most important thing” (YFF1, 14/02/2012).

Youth reported that men in the community are expected to take the lead in many aspects of community life. They seemed to be socialized to be self-reliant, not to show their emotions, and to be strong and show their bravery in times of problems. Those who do not conform are labeled as ‘women’, and youth translated this as being a ‘weak’ man. Kulutwe provided a common response, “[D]uring those years (referring to more traditional times) when our parents were growing up, a boy was required to be strong and they (community) expected men to protect the family’s cattle from dangerous wild animals such as lions. Girls stay home. A man was (and still is) required, especially when it comes to marriage, he is the one to look for a wife ...” (YFGD1, 11/02/2012). Supporting Kulutwe during the same focus group discussion, Musiga pointed out, “[W]hen a family member passes away, and a man should be someone with a strong heart. He cannot just go there and start crying like the way women. He can’t roll on the ground as if he wants to die also. A man is someone who should take things (situations) easy and not react emotionally like the way our female” (YFGD1, 11/02/2012).

In sum and irrespective of focus groups or during individual interviews, participants seemed to understand manhood in similar ways. They embodied a *habitus* that translates into men perceived as providers (own a house, provide for family), spouses (married), fathers (having a

child or family), self-restrained and driven (good behavior), self-reliant and confident (know what you want to do and not be swayed by peers). In their view, a man also carries out duties that require physical strength emotionally, mentally, and physically. Sondaha, from Zion Secondary School summed it up by describing the “unacceptable” behavior that would shape how members in the community positioned ‘men’. He said, “[A]ccording to me, when someone is married and he is dominated by the wife, he always follows the wife’s instructions or orders. When people see that, they will say, ‘you are a woman’ Also when a man fights with his wife and is beaten by her, people will not respect you. They will say you are weak and no one else will fear you” (ZFF1, 25/02/2012).

Freedoms, gender, and being a man

Sakalo from Zion Secondary School mentioned that parents accord boys more rights and freedom, which according to him, contributed to teenage pregnancy. He said, “*I think boys have more rights or freedoms, they can do things anything, they can go out and they can find stuff like girls. I think girls are overprotected. They (parents) don` t really allow a girl to go out because whenever she tries to do this, that parent will ask ‘where are you going?’ and stuff like that. Overprotecting girls to me is causing high teenage pregnancy. These girls as soon as parents go somewhere or go to bed, they are the first people to sneak out of the house. These days especially at bars and clubs, although the entrance rule might indicate no under 18’s, girls who are under 18 will be allowed to enter as long as she is a girl no matter how young she is, she is going to enter*” (ZFGD1, 09/02/2012). In support of what Sakalo said, Xulu added, “[C]oming to freedom in the community or even according to tradition, boys are freer than girls. Boys can do whatever they can; they can go wherever as long as they just take care of themselves. But girls, hoo (meaning, no), they are always under control to avoid being impregnated” (ZFGD1, 09/02/2012).

This cohort felt that their physical built, emotional strength, and the different roles assigned to boys made them different to girls. They also believed that they were mentally different from girls. Emphasizing why they were different, Zwakile, one of the very vocal youth in the first group interview said, “*I think it is how we are made physically, we look different and have different roles, what men do differ things to what girls do. Our thinking capacity differs from the*

thinking capacity of girls and our emotional strength differs from those of girls. Girls are more emotional compared to men. Boys are stronger than girls” (ZFGD1, 09/02/2012). Xulu at the same school added, “You know, I am strong and that makes me different from a female because even if she is an older than me, as long as she is a female, I am stronger than her” (ZFGD1, 09/02/2012). Contributing to the discussion, Sondaha at the same school mentioned that, “Things which make man to differ from females are the type of work assigned to them. For example, if you are in a village, a female cannot plough; a female is only expected to cook, wash and in some traditions they believe that if you like too much cooking if you are a man, then something is wrong with you” (ZFGD1, 09/02/2012). Twakalire from Yatwe Secondary put it this way, “What makes boys different from girls in the community is what they do. Actually, if they [referring to members of the community] find you (boy) always hanging out with girls, gossiping and you are never found sitting with other boys, you are always isolated. That will lead to people to consider you as a ‘female’ because a man to them (people in the community) has to act different to this” (YFGD1, 11/02/2012). This perceived difference between boys and girls had implications for how this cohort described sexual relations and the decision-making in relationships, as I illustrate later on.

While boys were accorded the freedom (to do what they wanted), on the other hand, behavior by girls was more policed and regulated. The latter were expected to be more sexually coy, wait until marriage before getting into sexual relationships, be submissive, hardworking and always be at home to help parents with household duties. This is paradoxical, given the encouragement (by parents, peers, and expectations by the community to ‘prove’ one’s manhood) male youth received (implicitly or explicitly sometimes) to be sexually active before marriage. Zungu stated a typical response from this cohort regarding female behavior expectations in the community. *“In general, it is expected of girls to act responsibly with honor, carry themselves as precious (special) and with dignity. They are expected to act responsibly and not to start dating before marriage and for example, not go to clubs” (YFF1, 07/03/2012). Xulu in an individual interview put it this way, “People in the community expect girls to be hardworking, they should be humble, should not go to clubs but sometimes girls who don’t go to clubs boys expect them to be inexperienced when it came to sexual relationships” (ZFF1, 26/02/2012). Similarly, Zwakile pointed out that, “[G]irls are expected to be humble, they should not move around (be seen*

loitering in public) and should not change boyfriends every day. They should be humble and always seen to be helping their parents or mother at home; always doing housework like all girls do” (ZFF1, 03/03/2012). In some instances, it was not unusual to expect girls to have boyfriends. Sakalo stressed that if this were the case, girls needed to be known to be faithful to one boyfriend, reserved, and conservative in her demeanor. He stated, “... *If a girl has a boyfriend, she should be faithful to her boyfriend and not have many boyfriends, they also expected to be humble, wear properly without showing some of their body parts in order to be respected as a real girl” (ZFF1, 01/03/2012).*

Differential treatment was extended to men (as opposed to boys) by virtue of them being ‘male’. This differential was often to the disadvantage of women. Twakalire indicated, “*The treatment in the community for man and woman is not the same because people in the community still have that cultural mentality where they believe that men are more important than women. Men are treated as important because long time ago, man were the household leaders. They made decisions. So even today in the community, that mentality is not yet out. Women are always treated as second to man even during discussions. The man [is expected] to talk first, while the women will listen to what the man says, [thereafter] follow what he says” (YFGD1, 11/02/2012).*

It would seem therefore, that the *habitus* of this cohort of male youth was one shaped by a dominant heterosexual discourse. They positioned themselves as different to girls by identifying particular disposition, beliefs, and practices that they reported distinguished them from the female “other.” They also distinguished ‘real men’ from those men who acted outside the normative discourse. Male youth were ‘expected’ to prove they were ‘real men’ by adhering or complying with dominant heterosexual practices. It was clear in the focus and individual interviews that participants experienced social pressure from peers and other significant members (parents and elders) in the community to live up to the ‘ideal’ of being a ‘real man’, often whose practices sometimes put them at risk of HIV infection.

That this group positioned themselves differently to girls made me examine how they viewed decision making in sexual relationships that I explore in the following section.

6.3.3 Gender, Negotiation, and Power Relations

This study established that the *habitus* (attitudes, beliefs, dispositions and behavior) of this cohort was not only gendered but also framed in a normative, heterosexual discourse. Gender and unequal power relations were amongst the enduring structures shaping masculine practices and perspectives on ‘being a man’. Prime amongst these were notions that privileged men to determine when and how often to have sex and whether a condom is used, despite them being the ones expected to also have multiple sexual partners to prove being ‘real men’. Thus, included in this section is evidence that provides insight into how this group of participants continually referred to a community in which practices that shape masculine and sexual identities manifest in complex ways, sometimes causing youth to act against their better judgment and choice. Below, I present evidence to highlight the gendered nature of the social and cultural beliefs and practices that this cohort reported to be prevalent in the community. These include participants power relations and decision-making in sexual relations, propositioning, gender and sexual decision-making, beliefs on rights to sex, sex initiation, power, and masculinity, faithfulness in sexual relations, women’s behavior in sexual relations and number of partners in sexual relations.

Power relations and decision-making in sexual relations

There were mixed responses amongst participants regarding who should decide how and when sex should take place in a relationship. The majority were in agreement that it is the woman who does for physiological reasons; not because they believed she had the authority to refuse intimacy. Sondaha’s response encapsulated the general feeling amongst participants when he said, “[T]he one who should decide is a woman because we don’t know when is the woman having or not having her periods. Us boys, what we normally do, is force girls when we feel like having sex; but it is supposed to be a girl who has to decide when to have sex because she knows when does she not have any problem (menstruation)” (ZFF2, 27/02/2012). Sakalo agreed with Sondaha by stating, “[I]t is a girl because she knows whether she is having problems (menstruation) or not on that specific day. If a boy will not accept what she says that she is not ready [and] even if she is forced to have sex, she will not enjoy it because she is doing against her own will” (ZFF2, 04/03/2012). Similarly, Xulu intimated that fear of pregnancy may also be a reason why a woman should be the one to decide on when to have sex. Like his peers, Xulu’s reasons also centred on the females physiological condition and not because it was in her *right* to

make decisions over her body or the right to say no. He said, “... *because women have many problems, sometimes when you want sex with her she might be having her periods and she knows anytime she can get pregnant. It can be that she is not ready to have sex that is why it is important for a woman to decide*” (ZFF2, 28/02/2012). Xulu’s response seemed to acknowledge that a girl might have the right to say no beyond merely her current physiological state.

In line with the dominant voices amongst this cohort, Zwakile was of the opinion that boys should make the decision but for different reasons. He said, “[A]ccording to me, it is a boy who should decide, ‘now we can have sex’ and where to do it; because it is a boy who has stronger feelings toward sex. He is under pressure with his feelings; he should always be the one to decide so that he can release what is inside him” (ZFF2, 29/02/2012). His response suggests deeper views on the right of a man concerning sex. His views suggest an inherent or the natural make-up of a man who, according to him, has a stronger and ‘natural’ sex drive that needed fulfillment despite the girl’s feelings or her right to make decisions over her own body.

Unlike his peers, Shamurume seemed to be one of the only participants who intimated that it was a negotiated process between both partners. He remarked, “... *as a guy if I want sex but my girlfriend is not ready, I will understand because if I force her than it will be considered as rape which is a crime. The same applies to my partner; if she wants sex and I am not ready, she should just respect my decision*” (YFF2, 14/02/2012). Not only did this participant allude to rights, but he also inserted a discourse of respect and equality.

Propositioning, gender, and sexual decision-making

This cohort expressed mixed opinions on who can proposition, making the point that, for the most part, it was the male. This gendered understanding framed their views on sexual decision-making as well. Zama said, “[A]ccording to our culture it does not happen that a girl proposes a boy” (ZFGD2, 18/02/2012). Supporting Zama, Zungu from Yatwe Secondary School pointed out, “[L]ike in our culture, for a girl to propose a boy that is actually seen as **totally** wrong because it is not allowed” (YFGD2, 13/02/2012). Reasons put forward by some young men alluded to girls being ‘naturally shy’ and thus unable to proposition boys or initiate sex.

Others though, denounced this view saying that things have changed. During the focus group discussion Sakalo intimated, “[A]ccording to me, there is no problem there because when we boys also fall in love with a girl we normally approach girls and tell them our feelings like that I love you and so on. Therefore, I don’t see any problem for a girl to tell a boy that she loves him” (ZFGD2, 18/02/2012). Twakalire put it this way, “[A]ctually if we look in this life that we are living right now, independent country, everybody has the right to do what he or she thinks is right” (YFGD2, 13/02/2012). Similarly, Vashe have this to say, “I think it is right for a girl to propose a boy. I believe that it is better for somebody like a girl to be precise to tell me that ‘I love this guy’” (YFGD2, 13/02/2012)

Some of the young men in the study said culturally, it was not accepted that girls proposition boys, while others acknowledged that things have changed, making it more acceptable. Culture, which advanced men as being the head of the family and more powerful than women was pointed out to play a key role in girl’s being discouraged to propose boys or man. Those relationships which were initiated by females were seen not to last long; with negative consequences for the woman. The majority of the focus group discussants agreed on this matter. Twakalire said, “... culture discourages boys from being proposed by women because long time ago our parents in the past their culture was like a man is the head and a woman is under. There is no way a woman will tell a man what to do. In the culture they believed that a man is the only one who can propose a woman, so, that cultural mentality grew until now. In some communities woman still cannot propose to a man and if that happens, then it is a miracle!” (YFGD2, 13/02/2012). Kulutwe from the same school added, “... if I give an example, when it comes to animals you see there are scavengers and animals that are powerful. They hunt for themselves; put in their energy before they catch up the animal and kill. The scavengers will only come to eat when the animal is already dead. So a man is considered [like the hunter animal] to get their own girlfriend or wife, to be considered man enough (powerful)” YFGD2, 13/02/2012). Contributing to the discussion, Zungu reiterated, “[A] girl which proposes a boy will be considered like a player, Tya kulya ngandu tya kuneya (meaning, a crocodile catches those who go to the river). The relationship whereby a girl proposes to a boy won’t last long. For example, she sees Joseph as a cute someone and she will propose him. When she sees another man who is cuter than Joseph again, she will leave Joseph and propose to the next one, just like that. She

will move from one man to the next and therefore relationships will not last for long” (YFGD2, 13/02/2012). Musiga from Yatwe Secondary school explained, “If we look back in our culture, our families had the belief that a man should be someone who will leave his compound and look for a girl or woman to marry; not a woman to come and look for a husband to marry and that is regarded a taboo” (YFGD2, 13/02/2012).

Along with girls not being expected to proposition boys, it is still considered taboo for them to make decisions relating to sex. Girls would be labeled ‘bitches’ or ‘easy goers’. Shamurume, whose family does not adhere to rituals in the community, put it this way, “... *in most cases because girls have that shyness and then they fear if she initiate this (sex) maybe the boyfriend or men will call her a bitch or something” (YFF2, 14/02/2012).* Thus, while he did not hold strong cultural views, the practices in the community impacted his beliefs on what was ‘acceptable’ behavior between boys and girls.

Beliefs on the right to sex

Participants were asked during the face-to-face interviews how they made decisions about when to have sex in their own relationships, the majority stated that it was a man’s prerogative not only to initiate sex, but also decide where it should take place. Many said it is considered a taboo in their communities for a girl to initiate sex. In this regard, Zungu, who reported to carry strong cultural beliefs, shared an instructive sentiment, “*I think in most cases because my relationship is mostly based on cultural principles and it is my right as a man to decide; it is like a taboo for my girlfriend to decide or to request for it.* He acknowledged though, that things are changing and that there are circumstances when girls can initiate sex. He proposed that girls do not do this overtly; thus reinforcing the notion that they should be coy. Rather girls would, “... *sometimes give some signs just to show [you] that she wants sex.*” While this may be the case, his view was that it was still the man’s prerogative to decide. He said, “... *it is my right as a man to decide upon this things” (YFF2, 08/03/2012).* Sondaha who had earlier agreed with his peers that girls should decide on when to have sex due to their physiology, decided differently in the individual interview. He said that it is a man who should decide because he propositions in the first place. He said, “[A]ccording to me, it is me who should decide. Because it is me who proposed her and she has to follow what I decide. She didn’t come and propose; it is me who has the right to go

and propose her until she agreed; because of that it should be me to decide and not her” (ZFF2, 27/02/2012). Zwakile, an articulate youth, who was proud of being circumcised, put it this way, “[I]t is me who decides. If like I am now... if I will have the feeling for sex, I will try to find time and place so that I can tell my girlfriend for us to have sex; especially if I have not had it for a long time” (ZFF2, 29/02/2012).

Girls who initiated sex were viewed as promiscuous and would be stigmatized in the community. In this regard Zungu, in an individual interview, said, *“I think generally, it is perceived as the boy’s right to decide and that is because of a certain stigma which is attached to girls initiating. In the past girls were not expected to stand out and ask for sex proudly; it is like a taboo for a female to ask when sex should take place. It is like a belief that, should a girl mention it to a boy it is an indication that she is an easy goer or she likes sex. It is like traditionally; it is a man’s right. I don’t know why, it was made that way, [but] it is how we got it” (YFF2, 08/03/2012).* Along the same vein, Sakalo stated that, *“When we are in a group with friends they always say a boy is the one who has the right to decide especially if the girl comes to the boy’s room. The girl cannot be expected to refuse the whole night without giving in to sex. Once she is in the boy’s room, it is the boy who has to decide that is what we normally discuss” (ZFF2, 04/03/2012).*

However, three of the seven boys who participated in individual interviews said there should be some form of negotiation and mutual agreement between partners even though they had agreed with their peers in the focus group that boys should take the lead. Xulu stated, *“... most of the time, I ask my partner whether we can have sex. If she says, ‘no’ and gives reasons; I will understand and wait for the time when she will be ready” (ZFF2, 28/02/2012).* Sakalo made a similar point by saying, *“In my own relationship, it is my girlfriend who decides because I am a person who respects gender balance or what can I say, 50/50 in order to let her also feel respected” (ZFF2, 04/03/2012).* In his individual interview, Vashe indicated that cultural practices have changed and that girls can initiate sex. He said, *“[T]hese days, I would say the youth have changed; to give female a chance. They have learned to balance the situation, at times you find the man decides then other times the woman would also decide upon it, now is like a balance” (YFF2, 14/02/2012).*

The two examples above not only provide insight into male youth's beliefs, but also illustrate how peers in the focus group shaped perspectives and how, in some way, that discursive space created a situation where some agreed (and complied) with the dominant views even when they did not necessarily subscribe to them.

Those who said they take decisions about how and when to have sex were asked how they would react if a girl initiated sex in their relationships. Zwakile responded, *"If it is she (girlfriend) who decides to have sex and I am not ready I will not function nor do it well because I am not ready. With the girl if she is not ready to have sex when I want it, I will try my level best to convince her just for me to have sex, I will give her the reasons why I am desperate for it"* (ZFF2, 29/02/2012). According to him, if his girlfriend pressured him and was desperate to have sex, he would totally refuse. He said, *"I will question her and tell her that I am not ready maybe she can come the next day"* (ZFF2, 29/02/2012). When asked why he or other boys don't understand when a girl says she is not ready for sex, Zwakile responded, *"[B]ecause with boys, if that happens; you will have many questions about why she is refusing today. I will also pressurize her and tell her that there is no way she can refuse to have sex."* (, ZFF2, 29/02/2012).

While there were different views on what individual boys would do in a situation where they needed to negotiate sex, this cohort reported that the common view of people in the community was that it was a man's right and prerogative to decide when and where to have sex. They referred to 'culture' as one of the reasons why girls would not initiate sex. This though was not the sole reason as the following section illustrates.

Sex initiation, power, and masculinity

Some of the boys said they did not appreciate a girl approaching them to have a relationship or for sex if they were in a relationship. They viewed it as undermining a man's masculinity and not as girls asserting their authority or exercising agency. Some intimated that even parents would question a boy's qualities and credibility. Importantly, they would question his masculinity. Some also indicated that the man might take the girl for granted in such a case. Musiga said the following in this regard, *"[I]t is like we man, we always like something that we desire; not like for instance if a girl comes to you, you might not love that girl. You will question her motive. You*

will feel, ooh, this girl sees me that maybe I cannot propose a girl or what is she trying to do now. A man will take it that way; that this girl thinks I am not a man enough to get my own girlfriend” (YFGD2, 13/02/2012). Shamurume on his part said, “To my side, a girl to propose a man is not good, a man might take a woman for granted. For example, he might end up impregnating the girl, which is a problem. What will happen if she becomes pregnant? Sometimes she will try to argue with the boy and he might reject the pregnancy” (YFGD2, 13/02/2012)

Supporting his peers, Kulutwe pointed out that, “[I]f a woman proposes a man and when they go to his (man) parents they will ask the man, are you the one who proposed the woman? How is he going to respond? Is he going to say that I proposed her or maybe she proposed me? That won’t show up like a male quality. If I go back to what we discussed the last time that a man is not a real man if he is easily persuaded by a girl. If you don’t know how to propose then you are not really a man, that is what it shows. Because that girl when she will go out and meet others, they will ask her, ‘how did you get that man’ [and] she will tell others, I am the one who proposed him. They will say ‘he don’t know how to propose’ and that will be an embarrassment” (YFGD2, 13/02/2012).

Thus, there were different opinions on the question of who should *initiate* a relationship. Most participants used ‘culture’ and man’s ‘natural biological make up’ as reasons for why they responded the way they did. Those who agreed said men (normally) had stronger feelings and thus, were expected to take the lead. Sondaha said, “A boy [should initiate], because us boys are the ones responsible because it is me who loves and it is not for a girl to propose a boy, no! It is us [boys] who have stronger feelings and who also decide which person to take” (ZFGD2, 18/02/2012). Ngato at the same school has this to say, “According to our culture even our ancestors never saw a girl proposing to a boy. It doesn’t happen because a boy is like the one with stronger feelings than a girl and it is how it normally happens” (ZFGD2, 18/02/2012). Xulu added, “It is not good for a girl to propose to a boy. Even the boy she is going to propose to will ask himself many questions. With the many diseases these days, he will think ‘this girl who is proposing maybe she has a disease and want also to infect me’” (ZFGD2, 18/02/2012). Those who did not agree were of the opinion that anyone can initiate a relationship, depending on the

situation. Twakalire stated, “*We live in a world of equality, so, if you love somebody and you believe that the love you feel for that person is real and you really want to spend the rest of your life with that person, why should you waste time; whether you are a man or woman go for that person!*” (YFGD2, 13/02/2012).

Young men who believed and attempted to act differently from the dominant norms and practices in the community paid the price by being labeled, jeered at, or by having suspicion cast over their masculinity and sexuality. Thus, while many in this cohort recognized that males can (and indeed they reported knowing that some males have) act outside the ‘expected’ or the ‘norm’, for the most part, this group of male youth seemed more willing to reproduce rather than transform the deeply held beliefs and practices in the community. They embodied these in their demeanor during the focus and individual interviews. Even though there was room to deviate, many in this cohort of ‘modern’ young men seemed bound by the heterosexual masculine norms produced and reproduced in families and by peers. For the most part, this embodied masculine *habitus* regulated ideas, beliefs, and practices relating to sex, sexuality and sexual relations. It regulated who spoke (those with authority to frame the discourse) and the conditions under which they spoke. It disciplined those who acted outside the norm by labeling them as ‘deviant’ or ‘abnormal’. Importantly though, this *habitus* regulated the beliefs and reported behavior of the majority of the young men who participated in the study; aspects that might have consequences for risk and vulnerability towards HIV and AIDS. It also shaped their conceptions of who should be faithful in a relationship.

Faithfulness in sexual relations

Faithfulness was considered the concern of females or woman in a relationship because they were conceived as unable to control themselves. Reasons for this, as majority of the participants suggested, was the fact that, unlike men, women don’t proposition. Sakalo stated, “*[A]ccording to the way I know, it is a woman who is supposed to be faithful because if it happens that it is the man who is faithful and not the woman, [one] will always see that the woman will not be able to control herself. Therefore, it is better for a man because he can control himself- if he always goes out to get other partners, he can control himself. It is better for a man*” (ZFGD2, 18/02/2012). Sondaha at the same school added, “*[A]ccording to me, like the way it is happening*

here, it is difficult to be faithful. Only girls can be faithful; we boys should go out [and also] like how it is happening in our community; we believe that a girl is mine only- but I can go and get another girlfriend. The girl must remain at home since it is I who proposed her. I can do anything I want” (ZFGD2, 18/02/2012). Supporting his peers, Zama stated, “Like my friends say, it is a woman who is supposed to be faithful because she is not the one who propositions a man. Therefore, there is no way a boy can expect a girl to come and proposition him. If he wants someone (another girlfriend) else, he should go and propose. It is difficult for a boy to be faithful. It is us (boys) who go to girls and it is not good for girls not to be faithful because they do not have the right to go and propose a man. It will bring shame to the girl because there is no way they will call a man a prostitute. He can have many girlfriends; but he will not be ashamed like a woman” (ZFGD2, 18/02/2012).

Ngato differed in his opinion in that he suggested partners should take mutual responsibility to be faithful to each other. He said, *“[I]t should be 50/50; both have that responsibility to be faithful to each other. It should not be like a boy or man can just go out while the woman should only wait at home without having another partner. Both of you that remain at home and trust each other. It is how it is supposed to be in a relationship” (ZFGD2, 18/02/2012). Zungu agreed with this view even though he was from a different school. He said, “I think a man should be more faithful than his woman or a man should be faithful because like for a man every woman that he sees is beautiful. If a man can be faithful [to one partner] that means he will only give his love to his girlfriend and will not take other ladies.” (YFGD2, 13/02/2012). Twakalire agreed to this, stating mutual trust and respect as important ingredients in a relationship. He had this to say, “... both of them because in order for them to earn trust [one] needs to respect [oneself] and be faithful.” In his view, faithfulness, started with the individual and was not an expectation one should impose on a partner. Through mutual trust and respect, partners agree to be faithful to each other. Twakalire also associated faithfulness with protecting oneself and one’s partner from diseases. He said, “If you know I cannot stick to one partner and that partner of yours finds out, she will also have to find another partner... because she does not trust you. [If you are not faithful] anything can happen... when you or she goes out, you bring a disease which means you will also be infected... so you need to be faithful to one another”(YFGD2, 13/02/2012).*

Some participants indicated that women ought to bear the responsibility of being faithful given that they show visible evidence (e.g. pregnancy) of unfaithfulness. This physical manifestation would highlight to people that the girl/woman was unfaithful, while this would not be the case with men. Youth also suggested that parents would criticize a female more than a male; even if they knew that both were unfaithful (or promiscuous). Musiga made the point that, “[I]f we look in our community, people always regard women to be faithful because they are the people that show the symptoms or the signs (of unfaithfulness) more easily but for us men.” While he did not condone unfaithful behavior by men; rather he made the point that there were no visible signs that men had been unfaithful. He said, “I am not saying that we should do it but for us men it is difficult, is very difficult to show the signs that you were having sex where you went” (YFGD2, 13/02/2012).

Although women and girls often are treated as second fiddle in relationships, especially in decision-making, some of the participants in this cohort held the view that women (and girls) should be treated with respect for various reasons. Some of the young men were encouraged (by their peers) to treat girls with respect because they were future mothers and would one day bear children for them. In this regard Shamurume mentioned, “[M]ost of my friends say, men should respect girls, there are those who want to have a lot of girls at once but mostly you should, we believe respect girls or woman.” (YFF1, 14/02/2012). Similarly, Zungu stated, “Friends say girls are supposed to be treated with respect because it is believed that these are the same girls who will become mothers one day and you know what a mother means to most of us as Africans.” (YFF1, 14/02/2012). Zwakile added, “What I know is that girls should be treated with respect like your mother because a woman is very important person. She should be treated with respect without doing bad things to her; like beating, insulting or anything to her. She should be treated like your own mother even if she is not your girlfriend.” (ZFF1, 03/03/2012).

Women`s behavior in sexual relations

While not all agreed, the most common response was that women were expected to be submissive and dependent on men in relationships. One participant likened men to being a head and women the shoulders. Zwakile encapsulated the general perspective of youth in this cohort by saying, “It is how it is supposed to be. A woman should be submissive because it is a man

who has the right and he is the one to plan their life. The wife must be submissive- if the woman is dominant and considers her husband less important, then it will not go well” (ZFGD2, 18/02/2012). Musiga had this to say, “Actually, if we look at our culture, women are expected to accept everything a man decides. They are lower (in status) compared to us (men). Men are considered like, for example, the head and women are the shoulders. There is no way shoulders can reach the head-that is how we believe it to be in our culture” (YFGD2, 13/02/2012).

Zama did not agree with the dominant view expressed in the above. He acknowledged that women have rights and need to be allowed to put forward their points of view. He said, “[A]ccording to me, a woman also has a right. The reason why she has a right is that you are the one who brought her into your house. If she is not allowed to make decisions, she can decide to leave you ... in a relationship we should be equal. When it comes to taking decisions like what others call 50/50, you must treat each other well... so a woman also has a right to decide what is good for in her relationship” (ZFGD2, 18/02/2012). In agreement with Zama, Sondaha also recognized the need for girls to be acknowledged as equal partners, even though he noted that they need to be ‘submissive’ but not to the point of being disrespected as partners. He said, “[A]ccording to me, if I have to add to what my friend said, a girl also has feelings like all of us. She can be submissive... if she wants it (sex) than she also has the right to ask for sex” (ZFGD2, 18/02/2012).

Ngato, like Zwakile and Musiga also drew on a normative construction of men having authority in relationships in particular, with men making decisions on behalf of girlfriends or wives. Describing men’s position in relationships, Ngato stated, “[I]t is how it is supposed to be a. A man has the right to decide about everything happening because if a woman always decides, people will think that she bewitched her husband. Vamupanga bwakama [meaning a man who only reacts to the wife’s instruction after being given some traditional herbs that makes him to always follow instructions given by the wife]” (ZFGD2, 18/02/2012).

Number of partners in sexual relations

Commonly, men were expected to have a number of sexual partners in the community from which this cohort was drawn even though this was not a sentiment shared by all the youth in the

group. Fear of HIV infection played a role in the shift in perspective as Sondaha pointed out. He said, *“A man should only have one girlfriend because both partners should trust each other. It is not like today you are here and tomorrow there. You can easily get a disease, which can be spread to your partner also. Therefore, it must be the two of you trusting each other”* (ZFGD2, 18/02/2012). Vashe concurred by saying *“[H]aving one girlfriend is the perfect thing one might do, because if you have many partners or too many girlfriends you may become infected”* (YFGD2, 13/02/2012). They acknowledged though that this was not the dominant view since having one girlfriend only could be interpreted as having been bewitched or ‘less’ of a man. Ngato confirmed this by saying *“[L]ike in the community where we are, some parents when they see that their son is only having one girlfriend or wife, they will say, ‘no, maybe the reason why he only has one girlfriend is that he is bewitched’.”* (YFGD2, 13/02/2012). Kulutwe agreeing with Ngato pointed out that, *“[E]specially these days, what is happening is like when they see someone having one girlfriend, they (people) think that the girl (or wife) did something to her husband. That maybe she went to someone like a sangoma (traditional doctor) for treatment so that her boyfriend will stay with her alone and not have that desire to look for other women. What is happening today is that majority of the guys have more partners because they want to show others that they are also men”* (YFGD2, 13/02/2012). Zungu summed it up by saying, *“... especially in Rundu, for you to have a single girlfriend... they (people) will just see that this boy he doesn’t know how to propose. At least you must have three to four ladies than they will see you as this boy also is a ‘good’ boy”* (YFGD2, 13/02/2012).

Participants during the individual interview had mixed opinions when asked about the number of sexual partners they thought a man should have. A participant made the point that technology (e.g. access to cell phones) made it easy for men to have more than one sexual partner. In this regard, Sakalo said, *“[T]he current use of cell phones is also contributing to infidelity where a man can store sixty names of his partners on his sim-card and communicate with each secretly”* (04/03/2012). He also made the point that, *“[P]eople in the community will think that the reason why he (a man) has many partners might be that there is something he is hiding... maybe that there is something he has which he wants to spread in the community”* (ZFGD2, 18/02/2012). Although Sakalo did not seem to agree with the notion of multiple partners, Vashe did not view having two partners as risky. He said, *“[I]f I am given the right to decide on how many partners*

I should have then I will only go for two. Two because I think the more partners you have the more you put yourself at risk. Risk of contracting different disease, sexually transmitted diseases and your life will just be complicated because it is very tough to head multiple families” (YFF2, 14/02/2012).

Responding to the question, Zungu at the same school differed with his friends, by saying, *“In my opinion, I think a man is supposed to have only one sexual partner because having one sexual partner... I think there is nothing wrong with it. This partner of yours will be able to give you what you need” (YFF2, 08/03/2012).* Differing with Zungu, Sondaha indicated, *“He can have two or three sexual partners but it depends on the man himself... how he feels. But it is supposed to be only one partner to prevent disease or pregnancy” (ZFF2, 27/02/2012).* Zwakile felt, *“[A]ccording to me it is maximum two, more than that is just going to create problems” (ZFF2, 29/02/2012).*

It seemed, therefore, that this group recognized the need to remain faithful to one partner to prevent disease and pregnancy. However, the pressure to conform and demonstrate one’s masculinity sometimes made them say and do things contrary to their own individual beliefs. Having two sexual partners seemed ‘normal’ and ‘appropriate’ and was not perceived as risky by peers and other members in the community. Zungu summed this up in the following way, *“[T]hey say one should have more than one sexual partner... [Referring to women] they say that one cannot live on bread alone something like that; you need to have a bit of cake today and a bit of biscuits tomorrow... you cannot live on bread from Monday to Friday and this influences some to have many sexual partners” (YFF2, 08/03/2012).*

At least three of the young men in this study said that boys should have more than one sexual partner because girls cannot be trusted. In this regard, Sakalo said, *“Boys in the community say a boy is expected to have many sexual partners because you cannot trust a girl that you are the only boyfriend. You might think you are the only one, while she also has a secret boyfriend. When you go to her and she treats you bad, you can go to the other girlfriend in order to make her jealous or make her feel bad” (ZFF2, 04/03/2012).*

Zwakile felt that it was difficult for a man to have one sexual partner especially for those who work away from home or stay away from home for long periods. He said, “[T]o have one partner to me is difficult unless you don’t work or visit other places and you only stay at one place. Once you go to other places automatically, you will try to find another girlfriend. So it is difficult for men to stick to one partner unless everywhere you go you take your girlfriend or wife with you once you leave her you will always find another girl there” (ZFF2, 29/02/2012).

When participants were probed on how a man with many sexual partners was seen by his peers in the community, one participant claimed that some would feel jealous of him, while two others pointed out that he would be praised or respected. Xulu, in his individual interview, gave a response that highlighted the ambiguity faced by boys in this community. He pointed out that, “[O]thers will praise him but others will say it is not good and the reason why he has many partners maybe he has a disease which he wants to spread” (ZFF2, 28/02/2012).

Thus, while men were ‘expected’ to have more than one sexual partner, reactions were not always guaranteed to be positive to someone known to practice this. This ambiguity was encapsulated by Sakalo’s response, “[L]ike in the community, if a man has many partners, his friends will respect him... but elders will not be happy because they will consider him to be adulterous. Some of your friends will be jealous although others will praise you and once you are praised you will feel proud and continue do have more partners” (ZFF2, 04/03/2012).

Reasons why men had more than one sexual partners varied from boredom with to one partner to the praise and status one receives from friends. While in some cases, the former was true; for the most part, status and ‘standing’ as a man played a more significant role in young men having more than one sexual partner. In this regard, Shamurume said, “I think status...when you have many partners you are respected by the other boys... that this guy is having a lot of girlfriends. He is a man” (YFF2, 14/02/2012). Similar to Shamurume’s assertion, Sondaha said, “It is status because like I am saying your friends will respect and praise you that you are a man for having many girlfriends and that you can propose as many girls as you can without them refusing. Some boys say I need to have many sexual partners so that if one refuses to have sex, I can go to the other one” (ZFF2, 27/02/2012).

Zungu added yet another dimension about why men engaged in multiple relationships. He said they did it to solicit extra material or financial support from partners and not for love or affection. He said, “[H]e is like ‘her parents are rich’ and he believes she will be able to support him because the other girlfriend is not able to give him what he needs.” He said some young men have “... your girlfriend that you love and have another girlfriend just to support you in terms of money or to buy for you toiletries.” For this reason, “... the majority support having many sexual partners” (YFF2, 08/03/2012).

It was considered unethical or embarrassing for a female to have multiple partners and those who dared to have were laughed at or called prostitutes by people in the community, as Shamurume suggested, “[I]n my language they will call that woman, *Sikumbu* (prostitute in local languages)” (YFF2, 14/02/2012). Vashe put it in the following way, “[T]hat one is unethical in the community. They don’t like to see that or hear such a situation... but they accept it when a man has; but a woman... no, they strongly oppose that” (YFF2, 14/02/2012). Zwakile agreed and said, “[P]eople in the community will laugh at her. She will be cursed and they will say she is not a woman. People will be shocked and it will look like a bad omen that she wants to bring in the community. ... According to Kavango culture, we believe it is only man who can have multiple partners. If a woman marries more than one husband then she is not a normal woman, they will say she is something else” (ZFF2, 29/02/2012). Sakalo stated, “[P]eople in the community will not keep quiet or praise her that she is a good girl. They will call her *Shikumbu* (prostitute) or they will consider her to be abnormal and call her different names without respecting her” (ZFF2, 04/03/2012).

When participants were probed why females were called names while males were praised for having multiple partners, Shamurume remarked, “It comes from the old generation; we found it there [that is why] I cannot explain it” (YFF2, 14/02/2012).

In this community, this cohort advanced beliefs and values about a man as more important than a woman, which had implications for the negotiation and decision-making process in sexual relations. Beliefs that included an understanding that a man can have multiple partners, demand

sex when it suited him and the normative construction of man as more authoritative could be seen as putting both men and women in this community at risk and vulnerable to HIV and AIDS.

The section below presents male youth's conception of sexuality and its role in influencing their decision to engage in safe or unsafe sexual practices which could put them at risk of HIV and AIDS.

6.3.4 Sex, Sexuality and Risky Sexual Behavior

One of the fundamental dimensions in relation to sexuality from the data is that this cohort of male youth experienced sex as irresistible and one of the topics which formed a significant part of the young men's everyday discussions. The data revealed that the participant's constructions of themselves as sexual beings and their constructions of themselves as men were based on their ability to engage in sexual activities. Put differently, there is a distinct sense from the data that if the participant's identity as sexual beings is removed, their identities as men might be severely thwarted. More specifically, it emerged that masculinity itself was experienced by this cohort as a requirement to earn respect from peers through sexual conquest. Moreover, meeting such a requirement as a man seemed to enjoy paramount importance to the extent that health principles were set aside in order to achieve sexual pleasure or conquest.

Thus, this section begins with providing evidence of the intersection between the social and cultural practices and risky sexual behavior, which compromised this cohort's health values under the pretext of attaining sexual conquest. This is followed by youths' conceptions of risky sexual behavior, sex before marriage and discourses on sex and risky behavior.

Social and Cultural Practices and Risky Sexual Behavior

Although during the face-to-face interview some participants pointed to factors such as lack of role models, natural desire, television, the availability of pornographic materials and pressure from parents, the majority singled out alcohol as one of the factors contributing to risky sexual behavior among young men in the community. Shamurume encapsulated the common response by stating, *"In my community I will say it is alcohol because when they are sober they don't do this things. Most of the things happen when they meet at clubs with girls. From there they go to*

houses and have sex and so on” (YFF2, 14/02/2012). Vashe, responding to the question in a face-to-face interview, extended the reasons for risky sexual behavior by stating, “I think most of this people are driven by few factors, one of them is drugs and alcohol and another is lack of basic education. They don’t know what could be the consequences of such actions. Maybe another [reason] can be few role models, which they see who do it; and it is appealing. They also try the same so those are few factors which I can point out” (YFF2, 14/02/2012).

Not only were drugs and alcohol isolated as contributory factors in youth engaging in risky sexual behavior, about also the type of role models whom they were seen to be emulating. It was thus not only the lack of ‘good’ role models but also the type of people who flaunted behavior that was potentially risky that young men looked up to.

Zungu emphasized the multiplicity and complexity of the factors that shape youth’s sexual risk behavior. He said, *“[I]n my view there are so many [reasons for sexual risk behavior]. Let me say the natural desire, which many can hardly resist. Then sometimes you will find it is driven by what the people say about it (sex) how often they want to have sex. Then something like this modern culture where you find people going out for a date and something like going to clubs. Another is, after you are intoxicated, after taking alcohol you are not yourself. Sometimes you develop this unnecessary desire, which was not there if one remained sober, for example. This modern world, we have like television, we have this pornographic magazines, images all over the places so I should say, this pornography. The talk around in the community ... sometimes they talk about who practice sex more and it is seen like the one who does it most of the time is like he is the best of the best... some of these things” (YFF2, 08/03/2012). Zungu not only identified what others in his group referred to, but also highlighted (a) the naturalness of men’s desire (something referred to earlier in this chapter) and (b) the influence of a ‘modern’ society. Regarding the latter, Zungu viewed access to television (and by implication, pornography) and sexual literature as factors that encouraged risky sexual behavior. As in the results earlier already suggested, Zwakile emphasized that parents put undue pressure on the male child, something he said puts youth at risk. He said, *“[P]arents also pressurize you to get a girlfriend if they know you reached that age” (ZFF2, 29/02/2012). To him, this expectation was a challenge since it too predisposed young men to risky sexual practices.**

Engagement in sexual activity among the male youth also involved responding to different pressures facing them as sexual beings, especially those from peers. Peers reportedly influenced (and encourage) friends to learn and engage in sexual intercourse as an activity that marks them as men. This, not only for the sake of status, but also to be identified as a man. Sondaha observed, “[I]n reality, it is just the influence of friends. If I have a friend and he has a girlfriend... what my friend tells me can also influence me to get that sexual feeling, which will also force me to get a girlfriend so that I can be like him” (ZFF2, 27/02/2012). Agreeing with Sondaha’s sentiments, Xulu indicated, “[W]hat makes young men to be sexual active in the community is the influence and example from friends. Sometimes a boy has not been sexually active but when he hears and sees that his friends are always having sex and he only watches, that will also force him to get a girlfriend. Sometimes his friends might tease him and say ‘you are not a real man that is why you don’t have a girlfriend’. That influences most boys to be sexually active” (ZFF2, 28/02/2012). Similarly, Zwakile had this to say, “It is friends. Friends also give example or influence [you]. For instance, if my friends are always with their girlfriends or go and call their girlfriends from the girl’s hostel blocks or go with them to their homes until the next day, that it will also influence me” (ZFF2, 29/02/2012). Along the same vein, Sakalo pointed out, “[T]hings that drive someone’s sexual behavior depends on the friends he has, the ones he moves around with. Are they friends who like girls or those who don’t like girls? Because of friends he has, every time they meet they will only talk what they did the previous night at bars (discos), which will also influence him” (ZFF2, 04/03/2012). Shamurume from a different school stated, “I will say maybe status, boasting to others that I slept with this and that girl” (YFF2, 14/02/2012). Thus, being able to show virility and boast about one’s sexual behavior seemed important to establish one’s status as a man and as a member of the peer group. Such expectations put young men at risk, despite the knowledge they hold regarding sexually transmitted diseases including HIV and AIDS.

This cohort of young men indicated that commonly, boys in their community were expected to have a girlfriend by the age of 21 years, although some suggested that due to technology (and/or modernization), boys have girlfriends at a younger age. In this regard, Zwakile said, “[L]ike in my community, it is when you are 21 years old then they allow you to have a girlfriend. If you don’t do it, sometimes your father will call you and tell you to start proposing girls. He might say

'can't you see your friends?' or ask which girl are you interested in [especially if he thinks you are afraid to propose]. Like in our culture our parents can do it and propose the girl on your behalf and bring her to you" (ZFF2, 29/02/2012).

Vashe supported the idea that boys in the community have girlfriends earlier than 21. He said, *"[N]ot in all communities these days due to the current technology. Boys these days no more wait to reach 21 years- sometimes only at 17 years, they start to propose to girls. Some even stay with a girl in the same house and only after impregnating her will the boy go and ask permission from her parents" (YFF2, 14/02/2012).* Xulu responding to the question pointed out that, *"People in the community expect someone to get married at around the age of 25 years or after you have at least turned 18 years. However, most boys don't reach those ages. Some marry at a very young age, sometimes like 16 or 15 years; they are already married" (ZFF2, 28/02/2012).* Sakalo suggested that, *"A boy is expected to have a girlfriend once he is about 19 years old and for someone to get married once you are at about 25 years then you are allowed or given permission by parents to stay with a girl and have your own place (house)" (ZFF2, 04/03/2012).*

It seemed that boys were (inadvertently) encouraged to have sex earlier than when they were expected to be married due to how masculinity and sexuality were constructed in this community. Zwakile pointed out that, *"[W]hat I see from my friends is around 16 years old...when you reach puberty and start having sexual feeling and thinking about girls, that's the time" (ZFF2, 29/02/2012).*

Apart from friend's influence, young men seemed to inadvertently be encouraged to engage in sexual activities or to be sexually active in order to prove their manhood by producing children. Such pressure from peers and parents, as stated earlier in this chapter, created conditions that predisposed youth to risky sexual behavior. Shamurume put it this way, *"I will say in my community, when a boy grows up at about the age of 25, each and every one (males especially) should have a kid by then. This drives boys in the community to have sex, unprotected sex because they want to impregnate girl to have a child. In most cases, if you are above 25 years in my community and you don't have a kid, they believe in this apparently ... when you die they will put a charcoal between your buttocks. So in my community, boys tease each other about these*

things” (YFF2, 14/02/2012) making it difficult for boys to resist having children. Zungu at the same school put it this way, “[M]ostly from what I observe in my culture, it is like you are expected to demonstrate your manhood by having sex as much as you can. It is considered the way to demonstrate that you are man enough, also sometimes to produce children. You want to make many children as you can. It is also believed that the girls available are too many for the males in the community!” (YFF2, 08/03/2012). Sondaha said, “It might happen that you are only with your grandparents and they will make fun of you that ‘what is wrong with you not having a girlfriend at your age’. Then you will start to sleep with a girl because you don’t want to feel belittled. Also we believe that having a girlfriend will give you the needed experience the day you decide to marry... not to embarrass yourself for not knowing what to do once you are with your wife and not become a laughing stock of others” (ZFF2, 27/02/2012). Zwakile at the same school explained, “[L]et me start with the culture. There are certain roots, which we dig in the bush, which are pounded and mix with oil; you smear on your body. When you go to clubs, girls will be attracted to you. There is also something, which one can drink and once you drink it, it increases your sperm and gives you more energy. It also enhances your sexual feeling and makes you to be more sexually active. Sometimes, we are motivated by those who in polygamous relationships. Some boys take example from them because there are those who have many children from those relationships and some boys also want to have many children” (ZFF2, 29/02/2012).

Risky sexual behavior

In examining risky sexual behavior that put young men at risk of getting HIV, the findings reveal that many of the participants equated having sex was demonstration of their masculine identity. The pressure to prove one’s virility with the aim of producing children took precedence over the need to protect oneself from or to prevent the spread of a sexually transmitted disease. Sakalo’s narrative reveals this. He said, “[I]n the community, what puts us at risk of getting HIV is when you are praised by your friends once you had sex by telling you that now you are a man. You don’t fear girls and the respect you get when others see you have many girlfriends. All these things make you feel proud and make you to continue to have more... just to show your friends without realizing the consequences” (ZFF2, 04/03/2012). Zungu was of the opinion that young men “... are encouraged to have as many children as they can and these children are not from

the same mother. You will find that someone has more than three or four female partners just for him to increase his chance of having many children. In the process it puts the majority of males at risk.” (YFF2, 08/03/2012). Like elsewhere in this chapter, this participant seemed to ‘blame’ women as the ones placing men at risk, rather than recognizing how males put themselves at risk.

Risky sexual behavior was frequently the result of some cultural beliefs, which advanced the non-usage of condoms and promoted rites of passage for boys. These, participating youth confirmed, put boys at risk of getting HIV. Shamurume pointed out, “... *if you have sex with a girl or lady using a condom, you won't feel anything. The belief comes in whereby apparently our grandparents did not use condoms. Although we know that a condom is going to protect you from contracting diseases, but then you say, 'no, our culture does not promote the use of condoms. This puts a lot of us or boys in my community at risk and a lot of them have died because of this disease'*” (YFF2, 14/02/2012). Vashe at the same school responded in this way in his individual interview, “... *there are still some tribes that perform circumcision traditionally. These people make men vulnerable to HIV, because they don't really use sterilized equipment. That one is very risky*” (YFF2, 14/02/2012). Zungu, as he did earlier, pointed to culture and being “African” as reasons why youth considered and indeed had multiple partners. He said, “[T]hey say it is expected from an African man to have more than one wife and you are like entitled to have many sexual partners as per culture or tradition” (YFF2, 08/03/2012). Zwakile had this to say, “[W]hen it comes to culture when boys reach that stage of manhood they are circumcised and after circumcision they are given girls to test their manhood. It is done without any protection, which puts young men at risk of getting HIV. Another thing is boys have sex with girls at night while the girls are asleep. A boy will just enter a girl's room in the darkness and without her consent, have sex with her without a condom while she is asleep. Also through that they risk themselves of getting HIV because you don't know whether the girl you slept with is HIV positive or negative” (ZFF2, 29/02/2012). Sakalo at the same school made this point, “[B]ased on our culture, it is the belief that a man cannot stay with only one partner. You should at least have two or three girlfriends and it sometimes leads to boys having four or five girlfriends; you can have three girlfriends in one place, when new girls visit during holiday you will propose to one of them just to compete with the other boys. If she agrees, the number of your girlfriends is increased. Once your partners become more, you will not know who between them

is HIV positive and who might infect you” (ZFF2, 04/03/2012). Similar to Shamurume’s sentiments, Xulu from another school gave this view, “[T]hings in the culture ... like the belief that we boys have that it is not good to use a condom because you are killing your children. This is one thing in our culture, which puts young men at risk to get diseases” (ZFF2, 28/02/2012).

While men who had multiple partners were regarded to be ‘normal’ (the expected practice), not all of the youth in this cohort agreed. Vashe stated, *“I totally disagree to multiple partners. Maybe because of what I understand about sex and its consequences. I know back in my community, people still have this (multiple partners). I will blame it on the lack of basic education or maybe they are strongly attached to their tradition or culture” (YFF2, 14/02/2012).* Zungu from the same school shared the same sentiments as Vashe, by saying, *“In my view, not any of the two should have multiple partners because according to me, I don’t think it is not really right for one to have more than one sexual partners. Ja, I will not encourage any of them to do just that” (YFF2, 08/03/2012).* Shamurume also from the same school was in agreement with his friends. He said, *“I would say no one” (YFF2, 14/02/2012).*

Some of the youth in this cohort suggested that due to the disease these days, it would be suicidal to have multiple partners. In his individual interview, Shamurume said, *“[I]n the past, I think men were allowed to have two or three woman but those days I understand this disease (HIV and AIDS) was not there. At present if you have multiple partners, you will never know which one of them is infected and you will contract it from one of them and spread it to the rest. Obviously, if you have for example three girlfriends and you stayed with these girls for a year, you will not say every time you have sex with each of them that you will use a condom or protect yourself. Now how will you know amongst this three who has the disease if you all didn’t go for testing. You may get it from one of them and give it to the others causing them also to be infected. That is why I say none of the two should be allowed to have multiple partners. The reason being that to stop the story of HIV and protect lives, not to put our lives at risk or their lives at risk” (YFF2, 14/02/2012).* Thus, while most youth not only felt the pressure to conform to the dominant masculine ideals in the community, but also that it was *right* to have multiple partners, some recognized the danger and consequences for their lives and sexual health. This finding is encouraging and is encapsulated by the comment from Sakalo who acknowledged that

community views are changing in regards multiple partners. He said, "... *they understand the risks. It is no more the same views as it used to be. Now they understand that it is not good to have more than one sexual partner.* He said that it was "... *because of the disease, which just came... but all along it was believed it was the man`s right*" (ZFF2, 04/03/2012).

Sex before marriage

As with many societies today, there was a sense from the responses, of a cultural clash between community beliefs and values and youth's exposure to and influences by "modernization" and its ideals. Cultural norms (for example, premarital virginity that pertains more to females than males), still dominate in this community. While this may be the ideal, participants generally agreed that the practice of premarital sex is widespread among male youth (and by implication, females). Twakalire and the peers in his focus group suggested that real men *must* have sex because it was difficult to live without. He said, "[A]ctually, in this world that we are living, it is hard... we only believe that to be a real man or real girl you need to have sex. It is what we believe. So, a girl can have a boyfriend and then friends out there are the one who influence us" (YFGD2, 13/02/2012). His friend, Shamurume during the same focus group discussion, had this to say, "[F]or a man to wait until marriage to have sex, aye (meaning, no), it doesn't happen. Why I am saying this is because for a man not to have sex, it is just as if you are not building that strong relationship between you and your woman. That is why we believe that if you have sex than the relationship will grow very well" (YFGD2, 13/02/2012). During a different focus group discussion, Sondaha from another school pointed out, "[A]ccording to me, I don't agree with it because, for example, in our community when we grow up it is difficult to stay without having sex. Just to keep yourself away from having sex until you reach 25 years and then have sex that would be an embarrassment to you because you only hear about it [sex]. When you taste it for the first time, it will make you to have many partners because if you taste a sweet for the first time, you will not feel that this sweet is sour. Therefore, it is good that when you reach 15, for example, you also start tasting the sweet" (ZFGD2, 18/02/2012). Supporting Sondaha, Zama during the same focus group discussion added, "Like they say that one should be prepared before starting with a job. One should learn about something while you are still young and if you wait until you become old, you might not do the job properly. It is also the same when it comes to sex. If a boy waits until he is old enough to have sex, what normally happens to those who wait is

that when they have sex for the first time, they end up having many partners... sometimes having three or four partners because it is like he is not used to sex. He just wants to have more of it and he will not be able to control himself. He will be someone who will change partners until maybe he gets a disease” (ZFGD2, 18/02/2012).

Although some of the participants endorsed having sex before marriage, there were those who felt that they would rather wait until marriage. Zungu was one of the young men who stated, *“I believe in the statement that you must first marry before you have sex. It is a nice statement because if you wait until you marry, you can date a girlfriend and share fun without sex. You go together at the mall, library or wherever. You go just enjoy life with her but you don’t have sex. That way, you learn the manners of that lady; whether she has good manners or whether she is like those who play (YFGD2, 13/02/2012).* Musiga during the same focus group discussion put it this way, *“[W]hen you really love someone and someone also loves you much, you can set your plans. You decide, ‘ok, what we are going to do is this from today on since we started dating we are not going to have sex. We will have sex only when we put on rings that is real love” (YFGD2, 13/02/2012).*

There seemed to be contradictions in the implicit messages youth obtained. On the one hand the community seemed less concerned with male youth’s premarital virginity, yet on the other hand parents did not seem to endorse boys marrying early or even having a girlfriend. Thus, on the one hand parents wanted males to ‘prove’ their manhood, demonstrate virility, and produce grandchildren, whereas on the other hand, they did not encourage or advocate marrying early because they seemed to equate sex with ‘coming off age’ and as such, with young men asserting their position and authority as ‘men’ and adults. Zama suggested that the latter seemed to threaten parents’ authority, causing them to discourage early marriage. He said, *“[T]o allow young people to have sex before marriage... parents normally think that young people normally don’t respect elders. There will be no respect between elders and young people because if a young person is involved in a sexual relationship he or she will also consider himself like an older person and will be difficult for him/her to listen to the parents or other elder’s advice. (ZFGD2, 18/02/2012).* It would seem, therefore, that young men received mixed messages where on the one hand, parents wanted to ensure their sons are virile and ‘real’ men, while on the other

hand, they were afraid of being challenged and disrespected if young men ‘act like adults’ by having wives or girlfriends at an ‘early’ age.

Discourses on sex and risky behavior

This cohort revealed that the notion of sex as irresistible and a gateway to show one’s manhood was accorded high priority in discussions amongst boys. They reported that sex formed an integral part of most of their discussions and was considered to be one of the most intriguing topics among boys or men. They reported to discuss a variety of topics, ranging from condom use to comparing their sexual experiences. Shamurume said, “[T]hese days because of HIV and AIDS, we talk about using protection whenever you are having sex; to protect yourself from getting this disease and not to sleep around. One of the main points we discuss is the appearance of girls and the way they dress. Boys whenever they see a girl passing, they discuss about how they want to have that girl, which is dangerous if you are not protecting yourself ... that is how one gets the disease. It is how one spreads it especially if you don’t know your status” (YFF2, 14/02/2012). Vashe at the same school said, “[I]t is a complicated topic. We have different views from different people. Some might like sexual activities, some might say it is not good, so, you have different views from different people” (YFF2, 14/02/2012). Zungu pointed out, “I should say this becomes one of the most interesting topic you can ever share with others because it appears friends want to compare their experiences [to find out] whether they are all the same” (YFF2, 08/03/2012).

When participants were asked the reasons they talked about sex, Sondaha was of the opinion that majority of his friends are interested in sex and that they feel it is good to get involved in sexual relations. He said, “[M]y friends are interested. I usually see the majority of boys believe that whenever they visit another place, they should get a new girlfriend and have sex with her. When they come back, they continue with the girlfriend they left behind at home. Boys believe that wherever you go, you must get a new girl” (ZFF2, 27/02/2012). Shamurume described how, in their discussions, they talk about ways to convince a girl to have sex as well as the details of the act itself. He made the point that, “... [We talk about] how you convince a girl to have sex with you or when you are in the room with a girl, how you go about having sex with her and so on,. Those are normally things boys talk about” (YFF2, 14/02/2012). Vashe from the same focus

group put it this way, “[I]t is mainly sex itself, maybe sex styles. That is mainly what the boys discuss. They also discuss the use of condoms, the different types of condoms especially the few boys who use them” (YFF2, 14/02/2012). Agreeing with Vashe, Zungu added, “[W]hat we basically discuss is about the use of condoms and what girls normally say when having sex... whether they tell you to use a condom or not and also about the number of rounds one has with a girl” (YFF2, 08/03/2012). From a different focus group, Zwakile put it this way, “[W]e also normally talk about what we do with the different girls we have and how they react or behave when having sex. We also discuss girls who are active or initiate sex when she is with the boyfriend. Sometimes, we talk bad about them for taking the lead (initiating) and consider them more sexually experienced” (ZFF2, 29/02/2012).

Sondaha described other aspects related to sex that boys discuss. He said, “[T]here are many things we discuss. Some of my friends say that if one is circumcised, he enjoys sex more than the person who is not circumcised. ... Some boys say that if you want to enjoy sex more, then you must get a girl who is your age” (ZFF2, 27/02/2012).

The results indicate that this cohort was of the opinion that most boys or men were in sexual conversations with peers and that their discussions ranged from condom use, responses by girls during the sexual act, sex styles, advantages of sex and the number of partners males could have. When in a group, boys were not coy about what they discussed. They also coerced those who did not yet have girlfriends, putting pressure on peers to conform to the dominant practices in the community. Zwakile summed it up thus, “[Y]es, if we are four in a group and three of us have girlfriends and one does not have, we will encourage him also to get a girlfriend by telling him the benefits of having a girlfriend. Once a new girl comes to the area, we will help him to propose to that girl” (ZFF2, 29/02/2012).

Beliefs and practices about sex as irresistible and that it determined ‘manhood’ circulated among young men in this community. This cohort reported that peers were critical in not only determining but also shaping sexual behavior. This assumed pressure, added to potential risk to contracting diseases, and in particular exposure to HI-Virus.

Thus, the section that follows focuses on participants' views and experiences on HIV and AIDS and its association with risky sexual behavior. It includes participants' reported knowledge and perceptives of the epidemic as perceived in their community, the use of condoms, as well as their notions of their own vulnerability toward the disease.

6.3.5 Risk and Vulnerability to HIV infection

Although this cohort of male youth report to have knowledge on the mode of transmission of HIV and its related consequences, the data revealed that the construction of a normative masculinity continually led to them reporting on decisions that put them at risk. They reported to engage in sexual activities that affirmed their position as 'real' men and by so doing, sometimes put them and their partners at risk. By depicting men as invulnerable and unemotional, this construction of masculinity limited boys in this community from acknowledging the health risk they might face through engaging in risky sexual behavior.

I begin this section by presenting aspects about the participant's knowledge on modes of HIV transmission to understand how this knowledge was translated by the participants in relation to their risk and vulnerability to HIV and AIDS. I follow this with other dimensions that include youth's perspectives on HIV and AIDS as a problem in the community, the use of condoms, and vulnerability and contraction of the HI-Virus.

Knowledge on modes of transmission of HIV

All of youth in this cohort depicted knowledge on the different ways in which HIV was transmitted. As they indicated during the focus group discussion, all seemed aware of how they could contract the virus. In this regard, Shamurume said, "*[H]IV is transmitted through using sharp objects. For example, if my friend and I want to draw tattoos using a needle on each other and we share the same needle. If one of us is HIV positive, then it is likely that the other one might get HIV*" (YFGD2, 13/02/2012). It is interesting that this participant selected to describe the above as an initial response to the question on how one contracts the virus; given that many (including this participant) proposed to be sexually active. Xulu at the same school added another dimension by adding, "*[A]nother way is through sexual intercourse when a condom is not used. When condom is not used, the fluid from the men's penis and that from the woman's*

vagina ... if it enters one of their private parts and one is HIV positive, then the virus can be transmitted” (ZFGD2, 18/02/2012). Sondaha had this to say, “[T]his is still happening in our culture, especially in our region Kavango where a grandmother has a small grandchild and the mother’s baby is not able to breastfeed. The grandmother will breastfeed the grandchild and if the grandmother is HIV positive she will also infect the grandchild” (ZFGD2, 18/02/2012). Sakalo, in the same focus group said, “[T]here is also something we almost forget, for example, our traditional healers who use one blade to sometimes treat a whole family of 10 people. If one of them is HIV positive, the others will also become infected” (ZFGD2, 18/02/2012). Zama during the same discussion, explained, “[A]ccording to our culture, also like my friend said but differently, the cultural belief we have that a man cannot stay with one partner and if a man has multiple partners those partners might not be trusted. They [the partners] might also have different partners with whom they sleep and if one sleeps with someone who is HIV positive, the male partner will also be infected” (ZFGD2, 18/02/2012).

While this cohort acknowledged that HIV might be transmitted through sexual intercourse, they did not put it forward as the primary mode of transmission. Instead, they described needle and blade sharing use as forms of transmission before describing sexual activity.

HIV and AIDS as a problem in the community

HIV and AIDS was viewed by all participants as being a problem in their community. They mentioned that the number of orphans was on the increase and that many skilled workers were dying due of the pandemic. Zama observed, “[I]t is really a big problem in the community because we are losing many skilled workers; those who know the job. For example, teachers and other workers, the majority are dying from the disease. It is difficult to replace these workers especially teachers. When it comes to orphans, it contributes to poverty in the community if the teacher or worker dies in the community, who is taking care of others” (ZFGD2, 18/02/2012). Similarly, Vashe had this to say, “[H]IV is bad in our community. Actually, it is because it creates discrimination so when people know that you are HIV positive, they start discriminating against you. Some of your friends who even shared the same spoon with you now won’t share it with you anymore. They might even hate you for good” (YFGD2, 13/02/2012). This cohort not

only acknowledged HIV as a problem experienced in the community, but also its consequences, which included amongst others, stigma and discrimination.

Perceptions of HIV and AIDS in the community

Traditional and Christian religious beliefs shaped the reasons put forward by this cohort as to why some people contracted the virus. Most participants concurred that people in the community blamed contraction of HIV on witchcraft or punishment from God to those who sinned. Zama indicated, “... before one is diagnosed with HIV, the majority of people in the community will first suspect witchcraft. They will say that the person is bewitched because they don't think first or take the person to New Start (an HIV testing centre) for testing. Another reason why they suspect witchcraft is due to the signs of HIV/AIDS since the signs are not detectable, especially if you are not educated” (ZFGD2, 18/02/2012). Zungu from another school pointed out there are misconceptions that still exist in the community regarding how one contracts the virus. He said, “[L]ike our parents usually say that HIV is a disease that is in a beer. They say that this beer was made in Europe and exported to Namibia. If people drink the beer then the disease is spread slowly through their bodies. Others say that this disease comes from monkeys. They say that a human had sex with monkeys and that is how the disease was passed from the monkey to a human being” (YFGD2, 13/02/2012). Kulutwe from the same school put it this way, “[S]ome people in the community, especially when it comes to religion, believe that HIV/AIDS is like a sin. This disease was send by God to punish those people who are interested in having many sexual partners. They consider people who have HIV/AIDS as those who are very interested in having many sexual partners. God is therefore punishing them for that-by them becoming infected with the virus” (YFGD2, 13/02/2012).

The participants also indicated that the community perspectives on HIV and AIDS varied from being seen as a dangerous disease to those who compared it to malaria, which is treatable. They reported that people were aware of the available treatment once tested positive with the virus; one could continue to maintain a healthy lifestyle. They reported that those who are HIV positive are considered to be promiscuous or carriers of death. Zama, during the focus group discussion alluded to that by stating, “[H]IV and AIDS is a disease that is dangerous because we see HIV and AIDS as one of the diseases which makes a person weak . When HIV is at the stage of AIDS,

you will not be a healthy person again. You will only wait for God to call you. In the community, AIDS is a very dangerous disease” (ZFGD2, 18/02/2012). People still stigmatized HIV positive people in the community, supposing them to be promiscuous. Vashe from a different school as Zama during the focus group discussion put it this way, “[B]ecause the community regards it as a disease for promiscuous people, many people are afraid of saying that they are HIV positive simply because if people hear that X is positive, they think he has been sleeping with all the girls in the community” (YFGD2, 13/02/2012). Musiga, during the same focus group discussion indicated that, “... in our culture, they might regard you as a ghost; a ghost of death [because] you are carrying death. Wherever you go, death is in you and you want also to give others. They will regard you like this even if you have a house. Few people will come and visit you because they might expect that you when you give them shikundu (a traditional soft brew), you might put blood there. They won’t even take food from your house” (YFGD2, 13/02/2012).

Kulutwe pointed out that due to information about living healthily once one has contracted the virus being available, people in his community no longer feared HIV. He said, “[J]ust as we talk about the present time that we are living so young generation are comparing HIV to malaria because once educated they know if you get HIV, you know how to handle it. They can eat nutritious food. Sometimes you are surprised to find out someone is very fat and living a healthy life but he has HIV. It is hard to believe that then you can even live long with the virus. Those people who are not infected might think it is not dangerous and that lessens people’s fear of HIV” (YFGD2, 13/02/2012).

The availability of antiretroviral drugs was also reported to have taken away fear of the pandemic. This cohort reported that this resulted in an increase of sexual activity as people in the community considered it like any other disease. Sakalo acknowledged this by saying, “[I]n the community, according to me, people who are at institutions of learning and those who are employed don’t seem to fear HIV. They regard it as any other disease because of the tablets (antiretroviral drugs) introduced, which can prolong your life. Even if someone gets the disease, he/she will no longer be fearful because he/she trusts the tablets introduced to boost his immune system” (ZFGD2, 18/02/2012).

Use of condoms to prevent risk toward HIV infection

During both the face-to-face interview and the focus group discussions, some of the participants asserted their dissatisfaction with the use of condoms pointing out that it reduces their potential to reproduce. Even though on the surface the majority supported adopting protective sexual practices due to their knowledge about diseases, they were adamant about the use of condoms. The following interaction with participants illustrated some attitudes towards condoms and condom usage as protection against HIV infection. Zungu recounted, “[L]ike for our ancestors, they did not have this thing of condoms. For them having many girlfriends was their right. To have many women, you know, means you bear many children and these children cultivate your land” (YFGD2, 13/02/2012). Kulutwe at the same school responded that he did not believe in wearing condoms. He said, “M[]y opinion is that using a condom like these days is based on our culture and religion. It is not good... like a seed when you plant a seed in the field and you take that seed and put in a plastic and bury it, it will not germinate” (YFGD2, 13/02/2012). Other reasons participants insisted on the non-usage of condoms were that it precluded them from their masculine rights to enjoy sex, reduced the feeling for sex, wasted their sperm, and it was a sin [to wear condoms] based on their religion. Zama explained, “[T]he reason why we don’t use condoms is because of the belief that one cannot eat a sweet with its cover. For example, if you take a chocolate and eat it with a cover, when you chew it you will not eat it nicely and pieces of chocolate will remain on the cover.” This participant suggested that girls support the idea of not using condoms when boys explain its use in the way he described. He said, “... that is why if you tell a girl like that, some will be convinced and will not even like to use a condom. That enables us (boys) not to support the use of condoms.” He further alluded to men ‘not feeling’ much when they used condoms. He said, “... also, when you sleep with a girl, we want to feel that you really had sex because using a condom is like lying to yourself.” Personal pleasure was not the only reason youth did not like to use condoms. Zama indicated that “... if sperms are destroyed, God becomes angry.” For this reason, “some of us don’t use and trust condoms” (ZFGD2, 18/02/2012).

Sakalo suggested that women themselves discouraged the use of condoms. He said, “[Y]ou will find some women when you try to put on a condom, they will tell you to take it off. They say, ‘I don’t like it’. If that happens, you will not waste time arguing because you also like it...continue,

so you will just have sex without a condom” (ZFGD2, 18/02/2012). Thus, both genders discouraged the use of condoms as these young men suggested. Zama confirmed this sentiment by saying, “[T]hey (girls) will even say when they meet friends that, that boy is just nothing, he is only masturbated.’ Yes, it is what they say that he only masturbated, he did nothing, I didn’t feel anything, he only lied to himself” (ZFF2, 29/02/2012). Xulu agreeing with his peers suggested that, “[M]ost boys in the community feel it is not important to use condoms because you will find others saying that it is a sin; like it is written in the Bible. I don’t know whether it is true. They just use the Bible; that God also said to use a condom is a sin because using a condom is like throwing away your own sperm” (ZFF2, 04/03/2012).

In contrast to his peers, Twakalire advocated the use of condoms and had this to say, “... using a condom in my perspective is the right thing to do because you have your girlfriend. When you have a girlfriend, you plan when are you are going to have kids. When you plan when to have kids during the period that you are going to stay together, you need to have fun and one part of having fun is having sex. In order for you to maintain your plan that you will only have kids in a certain period, you have to use a condom to protect yourself” (YFGD2, 13/02/2012). While Twakalire advocated the use of condoms, it was for protection against pregnancy rather than also against HIV infection. Like Twakalire, Vashe also advocated the use of condoms. He though, stressed joint decision making in the use of condoms. He said, “... I strongly recommend on that one, condoms must be used during sexual activity and must be decided by all two, both partners should decide on that” (YFF2, 14/02/2012).

Some participants felt that it was right for a female partner in a relationship to suggest the use of condoms. One participant had contradicting views that although that should be the case, boys always suppressed girls. Another participant indicated that most girls were shy to propose using condoms during sex and that they (girls) are not used to it (condoms). Twakalire who recommended the use of condoms, had a high regard for girls who advocated their use. He said, “[I]n my opinion, girls who says we should use condoms when having sex have a high thinking capacity because they think about the good things in what they are doing and the consequences of an sexual activity”(YFGD2, 13/02/2012). His opinion about condom was consistent with how he viewed and positioned girls in relationships. Zungu acknowledged that while it was ideal for

girls also to suggest the use of condoms, it was rare that they had the courage to do so. He also indicated the 'real reason' as one of control over girls. He said, "... *where we are living, for a girl to tell a boy to use a condom, I think that is very rare; because boys always control girls. It is maybe either the boy decides then the girl will follow. For a lady to tell a boy that 'let us use a condom' maybe that lady knows that maybe you (boy) are HIV positive or maybe she is HIV positive*" (YFGD2, 13/022012). Giving his version, Sondaha confirmed that girls do not regularly suggest the use of condoms but for different a reason. His response suggested that it was 'natural' for girls not to propose the use of condoms. He said, "*Actually, it is supposed to be like that. If we look at our girls, like the one I am dating, these girls are not open to propose the use of a condom. They are always shy and seem not to be used to it. Unless it is a boy who has to use it, girls hardly propose to use it due to their shyness*" (ZFGD2, 18/02/2012). Being coy about sex and by implication to shy away from suggesting the use of condoms, supports the hegemonic masculine discourses already described early in this chapter. Women, it would seem, complied with the dominant ideals of what it means to be a woman and by so doing, reinforced and reproduced dominant masculine discourses and practices.

When probed what would happen if a girl insisted on the use of condoms, two of the participants indicated that although it is right for a girl to decide on the use of condoms, the boy would get angry. Shamurume highlighted this by saying, "*[I]t is right; but most of the guys will get angry. Some of them (boys) argue that unless the girl suspects him to be HIV positive, arguments will start.*" He proposed that negotiation would be a challenge because boys had the power to control the relationship. He said, "... *I will never use a condom. Some will say my culture does not allow me to use a condom. Some will say, 'no, if you don't want then you can just tell me but I will not use a condom'*" (YFF2, 14/02/2012). Girls, it would seem, were left with little choice under these conditions, given the power boys have to control when and under what conditions to have sex. Xulu confirmed this when he said, "*[W]hat the boys say is that if that happens, they will either chase the girl out of the room and end the relationship or will use force to have sex with her even though the girl is not willing to have sex without a condom*" (ZFF2, 28/02/2012).

The participants intimated that some boys pretended to use condoms by collecting them in presence of friends or the girl. This, Sakalo suggested, was a masquerade that did not necessarily

translate in their use. He said, “[W]hen it comes to boys; when you get a girl at a bar you might send your friend to get a condom for you or you can go and collect it yourself in the bar where it is kept. But when you reach the bedroom, you are not going to use it because in your mind you only wanted to show your friends or the girl that you are going to use a condom” (ZFF2, 04/03/2012).

Vulnerability and contraction of HIV

In general, this group of participants were aware of their vulnerability toward HIV/AIDS, but had different opinions on whether young people’s sexual practices had changed in the face of this vulnerability, in part because they considered sex to be irresistible.

They felt they were vulnerable but not because of their *own* behavior. Rather, they were made vulnerable by their girlfriends. They proposed that some of their girlfriends are involved in relationships with sugar daddies. They were of the opinion that many young people were more sexually active and that relationships were based on receiving gifts, than real love. Vashe encapsulated the sentiment in the group, “*We are at risk. Like me, I am so afraid simply because like these sugar daddies... While I am still in school and I don’t have anything to give the girl so when she gets a sugar daddy (who is HIV positive) to support her, give her money, to buy some good stuffs, skinny jeans, short miniskirts all those things, she goes for it*” (YFGD2, 13/02/2012).

This cohort also suggested that young people’s involvement in relationships and their involvement in taking alcohol played a role in putting them at risk. These views were expressed during the focus group discussions when participants were asked whether they considered themselves vulnerable or at risk of HIV infection. Shamurume said, “*Like us boys, we are really more into alcohol. Take for example, like on Friday. I decide to go to Club Serious (name of a club) and Club Serious is just like a scrap-yard where you find all types of girls. What will happen when I get drunk, I will pick any girl and take her to my room. Due to the alcohol I drank, I will not have that power to put on this condom*” (YFGD2, 13/02/2012).

The majority in this cohort were of the opinion that females were more vulnerable to HIV infection while only two argued that men were more vulnerable. Zama said, “*A woman can*

easily get the disease. The reason why a woman can easily get the disease is because she does not have any other way of protection apart from condoms/femidoms. While boys, especially those who are circumcised; their chances of infection are slim” (ZFGD2, 18/02/2012). Agreeing with Zama, Sakalo put it this way, “[L]ike our girls these days they are more vulnerable to the disease because they are shy and not open. Some women who are open and will tell a man to put on a condom; but the majority is shy to tell a man to use a condom before having sex. Us men take advantage of that- not to use a condom and through that she can easily get the disease” (ZFGD2, 18/02/2012). Zungu added, “I think females. ... like here in our community, they [females] don`t want to say no. Whoever comes, they just accept; even someone they don`t know. Like here in Rundu, people who come from other places contribute to the spread of the disease. Where they come from, they have money. For a lady, when she sees the money, she thinks ‘I got a millionaire so I should just agree to his proposal to have sex’ and that puts them (girls) at high risk” (YFGD2, 13/02/2012).

Musiga pointed out that both (male and female) were equally vulnerable to HIV infection. He said, “[T]he high risk of HIV/AIDS involves both of them (men and women) because especially if I look at the girls, they are the ones who persuade boys to have sex it even if they don`t want sometimes. He blamed girls’ dress code and the manner in which their bodies were exposed. He said, “[Y]ou just look at their dress code. They wear something that is very tight on their body... you can see their body structure. Already there, when she puts on that thing, just like [she is] saying come, come. This type of dressing encourages boys to have sexual thoughts and that puts both of them at risk of getting HIV/AIDS” (YFGD2, 13/02/2012).

Zwakile was of the opinion that men were more at risk of infection, as he described in the following excerpt. He said, “[W]e man move a lot (describing employment practices) but the woman is most of the time at one place. For women, they always trust and wait for their husbands; but men go to far-away places and when they come to a new place, they get other women with whom they sleep. Sometimes they don`t use condoms and wherever you go, you want to get a new girl. That is how we boys get the disease and we don`t trust our girlfriends. When you come back home, you may infect your girlfriend (if you have contracted the virus) that is why we man are more vulnerable to the disease” (ZFGD2, 18/02/2012). Similarly, Sondaha also

argued that men were more vulnerable but for different reasons to those proposed by Zwakile. He compared men's sexual desire and ability to abstain with that of women, stating that the former are less likely to abstain from sex. He said, "*[A]ccording to me, men are more vulnerable to HIV because they change partners more. A woman can stay the whole year without being proposed or having sex; but a boy will not stay the whole year to sleep alone. Boys always look for girls. If they don't find satisfaction here, they will go and look somewhere else. Through that boys becomes vulnerable to the disease, that is why I say so boys are more vulnerable*" (ZFGD2, 18/02/2012).

In the narratives, sexual activity was also constructed as a trophy that was worth every risk. Danger was thus consistently viewed as secondary to sexual pleasure. Some participants reported that although they were concerned with contracting HIV, they found sex very pleasurable and hardly bothered about the virus. The construction of sexual activity as a trophy that was worth every risk frequently resulted in fatalistic narratives as demonstrated by the participants who admitted that one will just have sex under the illusion that death is there for everyone. In this regard Sondaha reported, "*... to tell the truth, we believe in the saying that having sex is like eating a sweet and no one like to eat a sweet with the cover on it. It is just like that! The concern is there, but during the time of having sex, you don't worry about any consequences; even if the girl is not healthy, you can even go for a second round*" (ZFGD2, 18/02/2012). Sakalo, like Sondaha, put it this way, "*[T]he concern is there. But there are times we become stupid, we just ignore [what we know] We just make ourselves forget and only when we finish doing it, we regret that 'I made a mistake'; because for us having sex improves our status among friends*" (ZFGD2, 18/02/2012). Similarly, Ngato pointed out, "*[T]he concern is really there, a person does something and only regrets later after getting what [one] wanted*" (ZFGD2, 18/02/2012).

For the most part, HIV infection was not a primary concern amongst this cohort. Some felt that they might be already infected and so it was superfluous being concerned about infection. Zama had the following to say in this regard, "*A]ccording to me, we don't have a concern about HIV/AIDS because we believe we are already on our own ... that 'I am already infected'. That is why we are not concerned of getting HIV/AIDS. For this reason, when you get a girl you just have sex without any protection*" (ZFGD2, 18/02/2012) For Sakalo the possibility of access to

anti-retroviral drugs made HIV infection less fearful. He intimated, “[W]e are really less concerned because I can get a girl today and propose to her. If she agrees, maybe the condoms are in my room and I am in my friend’s room with the girl if there are no condoms I will still have sex with her with the believe that even if I get the disease there are tablets (antiretroviral drugs) which I can drink to enable me live 10 or 15 years. That lessens my concern because 15 years are many.” He proposed that a fatalistic approach to life influenced decisions they made about sex. Not having a guarantee about the length of one’s life made boys like him make decisions that put them at risk. He said, “... others say that even if I get AIDS, it might be I will live longer than someone who is HIV negative who will die first... that is why I don’t care” (ZFGD2, 18/02/2012). Along the same vein, Sondaha added, “Like us boys, we believe already that death is there and a person must eat something the time you get it. For example, if you are a hunter and you find a dead hare, even a small one, you will take it along and not leave it. That is why boys, whenever he gets a girl, they will just have sex with her. They believe that even if you abstain, you will also die. That is why we believe that if you get a girl you must have sex” (ZFGD2, 18/02/2012). Zwakile was of the opinion that, “... boys believe that there are certain opportunities they get, which cannot be missed. You might find yourself at a place with a girl only and if you propose her and she agrees, you will definitely have sex with her without protection, which means we are less concerned” (ZFGD2, 18/02/2012).

The section above showed that the majority of the respondents had the knowledge on how HIV is transmitted and that HIV and AIDS was a problem in their community, yet they still reported to have unprotected sex. It would seem that some boys had a negative attitude towards condoms and some were reluctant to let go of an opportunity to have sex. Some had fatalistic attitudes while others felt that they might even be infected.

In the chapter that follows, I will analyze the findings of this study to establish their implications for the male youth with regard to risk and vulnerability toward HIV and AIDS.

Chapter 7 Discussion and Analysis

7.1 Introduction

This study was undertaken in order to understand the socio-cultural practices that shape male youth's masculinity and conceptions of risk and vulnerability to HIV/AIDS in Rundu Urban Constituency of Kavango region, Namibia. The study identified practices that shape prevailing attitudes and sexual behavior which link to the participant's perceptive on what is and is not socially and/or culturally acceptable. It also shaped their perspectives and experiences of their own vulnerability and risk toward HIV infection. The discussion that follows analyzes how constructions of masculinity, power relations and gender, sexuality have an influence on how youth in this study present themselves as men and their perspectives and experiences that make them vulnerable and put them at risk to HIV and AIDS.

I used Bourdieu's theory of practice to understand the dispositions, beliefs, and values of this cohort of participants. This theory explains that agents embody the habits, values and norms (*habitus*) practiced in a certain field (community) to navigate their social world. The theory helped to understand how the participant's masculine and sexual identities were mediated in a complex social and cultural environment often fraught with contradictory messages that made it difficult for youth to remain free of HIV infection.

7.2 Hegemonic and normative masculine discourses, compliance and vulnerability to HIV infection

The social construction of masculinity as argued by Moscovici (in Skovdal, *et. al.*, 2011) are forms of knowledge that include values, ideas and practices, which enable people to orientate themselves in their social world. These include local constructions of gender and gendered identities. Brown, Sorrell & Raffaelli, (2005) suggest that masculinity as a set of role behaviors encourage most men to perform in a certain way. In the process of identifying themselves as men, individual men will have to situate themselves in relation to the norms and representations that define dominant notions of masculinity in particular contexts (Lindegger & Maxwell, 2005; Nzioka, 2001; Lindegger & Quayle, 2009). This was the case with participants in this study. They narrated that young men were under constant pressure from the community to conform to dominant norms and values. Key in the case of youth in the study, was the need to procreate as a

dominant marker of their masculine identity. In this community, failure to ‘comply’ meant doubt cast over one’s sexuality and other times, labeled as ‘moffie’ or even gay. In the event of death, having had a child would avert the shame [to the family] and the cultural ritual of a charcoal put between one’s (the man’s) buttocks during burial.

Youth in this study reported that people in the community would not interpret a childless couple as having made the choice not to have children. Instead, the man’s sexuality and manhood would be in doubt if he had a wife, but no children. Inadvertently, parents too put pressure on young men to ‘prove’ their virility and to have a child. Parents would be concerned about their son’s sexual potency and would sometimes blame failure to have a child on witchcraft.

Bourdieu’s theory of practice, specifically his notion of *habitus* goes some way to explain the perspectives and dispositions youth hold in this study. He argues that *habitus*, as a set of dispositions, orders agents to think, conceive and oftentimes, act in certain ways. Hine (2010) points out that *habitus* predispose members of a particular society to interact in ways consistent with the dominant social norms of their group. Although Bourdieu’s theory of practice has been criticized for being deterministic and limiting in that it does not offer subjects agency to act outside the norm, the participants in this study demonstrated the extent to which the *habitus* is long-lasting by describing the pressure to conform and the consequences of acting outside the ‘expected’. Through conforming to the dominant values and practices of this particular community, young men in this community recognized theirs and their peers vulnerability to and risk of HIV infection; primary of which was the pressure to impregnate a girl in order to bear a child, which by implication resulted in unprotected sex.

Similar to the results in a study by Brown, *et. al.*, (2005), the results from this study also reveal that apart from procreating, other indicators of masculinity include men having a house, cattle, family that included a wife and children, fields (to plough), and a job. Men who didn’t possess the aforementioned attributes were only considered ‘ordinary human beings’ but, not ‘real men’. This led to the possibility of being disrespected and not be accepted in the circle of ‘real men’ in the community.

Young men in this study claimed that it was considered 'normal' for a man to have multiple partners. Those who conformed to such a practice were praised and received respect from peers. Such a practice thus encouraged many male youth to have more than one partner to show others that they too can attract many women. They acknowledged that many young men in the community have multiple partners. Evidence in a study conducted in South Africa by Leclerc-Madlala *et. al.*, (2009) supports the findings in this study, which indicates that men perceived themselves to be naturally superior to women and often considered it a cultural right to have multiple partners. Like Eaton, *et. al.* (in Leclerc-Madlala *et. al.*, (2009), youth in this study also reported that such behavior was generally equated with notions of a normative masculinity. They indicated that within this discourse, men who did not adhere to the ideals of masculinity set out by the culture and tradition, were put under the microscope. Men, who did not show 'adequate' interest in women by having several sexual partners or who only had one sexual partner, were constructed as 'bewitched', 'lacking in emotions, or 'abnormal'. While modernization brought with it new understanding and ideas to justify how life might be lived differently from traditional ways it is causing discomfort and resistance among some male youth and elders in the community who accuse it of breaking the traditional masculine values resulting in abnormality. As these young men reported, difference (when men did not conform) was constructed as needing an intervention by the community to return the man to a state of 'normalcy'.

From the study, it might be deduced that there were conflicting views between participants on the number of partners a man should have. Some supported only having one partner, while many reported that practices in the community encouraged males to have many sexual partners. The participants also revealed that having one sexual partner was considered by many boys to lead to boredom while having many sexual partners earned them status and praise from peers. They revealed that females were viewed differently if they were known to have more than one sexual partner. Pressure to be accepted and to be viewed as 'a real man' in this community seemed to lead to risky sexual practices that increased the odds of acquiring HIV amongst males. In addition, having multiple partners increased the likelihood of inadvertently passing the virus to several other persons.

Similar to previous research conducted by Ankomah, Mamman-Daura, Omoregie & Anyanti, (2011) in Nigeria that found that friends played a major role in the experiences of first sexual encounters, especially among male youth, this study also found that boys reported to sense the pressure from friends. They reported to want to prove that they had sexual feelings and that they were 'real men' because males who did not have girlfriends were mocked or teased by peers that they were either 'moffies' (sissies), gay. Findings from the current study demonstrate that beliefs about manhood in the community encouraged boys to seek sexual partners for fear of being labeled or ostracized from the peer group.

The results of this study also indicate that marriage was considered a critical factor in constructions of a 'real' man in the community. Men who didn't marry were labeled as impotent, promiscuous, stingy or perhaps infected with some disease, which they did not want to expose to their wives once married. Youth confirmed that such men were the laughing stock of the community. Similarly, a study by Barker & Ricardo in 2005 confirmed the importance of marriage in achieving manhood in some communities in Nigeria.

While the above may be the case, youth in the current study reported that it did not preclude married men from seeking extra-marital partners even though this was frowned upon. The assertion is supported by Delius and Glaser (in Hunter, 2004) who affirms that extra-marital affairs appear to have been quite well accepted in Southern Africa well before the onset of migrant labour. The study also revealed that men who were dominated by their girlfriends or wives, those who were promiscuous while married, and those who were not able to take care of their families were perceived negatively by the community. Thus, while the social and cultural practices encouraged early sex for boys, procreation to prove one's manhood, and the notion of multiple partners, men were perceived negatively if they were dominated by their girlfriends or wives, who were 'promiscuous' while married, and who were not able to take care of their families. The results suggest a double standard that gives men power outside and in marriage to make choices that put them and their partners at risk, despite there being a level of displeasure with married men being unfaithful.

Like the results from Barker & Ricardo (2005), the current study found that boys or men in the community were required to demonstrate certain abilities to qualify as men. Abilities such as confidence, responsibility, self-determined, self-reliant, and being focused served as the 'norm' in determining who would be acknowledged and 'accepted' as a man. For some sectors of the community, going through a particular ritual or initiation such as circumcision also qualified them as men. Participants also pointed out that adhering to the roles assigned to a specific gender was crucial to be admitted to the elite group of 'men'. It is expected that boys or men participate in all the 'manly' duties that include taking care of livestock, doing most of the farming and constructing traditional huts, while girls attended to household duties such as cooking, weeding, fetching water and firewood, washing and cooking for the whole family.

Youth indicated that physical attributes such as emotional and physical strength distinguished them from women. They reported that people in the community considered boys as homosexuals who grow up always being in the company of girls or associating themselves with girls (to the exclusion of boys). Boys were expected to socialize with other boys, be self-reliant, not to show their emotions in times of difficulty, and always take the lead. The majority expected girls to be submissive, responsible, humble, and hardworking. Girls were also not expected to go to clubs. Their dress code was policed as exposing one's body was frowned upon. Girls were also not expected to change boyfriends as often as boys.

Youth in this study thus emphasized the hegemonic masculine discourse stating that this was what they expected for themselves. Thus, a hegemonic masculinity in this field of practice not only regulated how 'being a man' was spoken about, but also who defined the gendered roles and responsibilities and concomitant behavior. The values and roles assigned to the different genders, as the youth in this study reported, shaped their beliefs and ideas about what it means to be a man and how they ought to behave in a complex field where traditional beliefs and practices still seem to dominate.

This study also showed that parents accorded boys than girls more rights and freedoms on the pretext that the former were able to protect themselves from influences, while girls could be easily influenced. They also said parents feared that girls may fall pregnant and thus policed and

regulated their behavior more stringently. One participant pointed out that overprotecting girls may be the reason why there is high teenage pregnancy in the community.

7.3 Gender and Power Relations

Gender according to Vlassoff & Manderson (in Ragnarsson, 2010:16) is socially constructed, produced and reproduced through people's action and it is directed by the social context (field) in which people enact their lives. They point out that the construction of gender is linked to societal processes involving class, age, sexuality, ethnicity and more, where gender can be self-defined, ascribed or imposed and it influences behaviors and opportunities in various social context such as schools, workplaces, families and health systems and it affects human health and wellbeing (Ragnarsson (2010:16). What is important according to Jewkes & Morrel (2010:1), therefore, are differences in the way in which men and women position themselves and act as social beings, i.e. the differences in which a particular society defines gender roles and the way they are constructed as being a man or woman based on the power and responsibility given to them. Furthermore, they argue that it is gender, not sex, which is more influential in determining behavior (Jewkes & Morrel, 2010). Whereas gender refers to sets of social expectations and ideas about appropriate behaviors of men and women, gender differences are fundamentally underpinned by power inequalities, which result in a subordination of women and their interests in a gender order that privileges men and is organized by male power (Greig, Peacock, Jewkes, Msimang, 2008:S36).

The narratives of participants in this study revealed that, for the most part, men were authorized to make decisions on the conditions governing sex (where, when and frequency). They reported that it would be taboo in their culture for a girl to decide or request sex. They accorded women opportunity to say when to have sex only under special conditions, namely during menstruation. Put differently, they agreed that women govern when to have sex due to their biological functions (menstruation). However, this did not give them the *power* to refuse sex. Thus, while women could say no to sex when they menstruated, they did not necessarily govern when and how often to have sex. Youth reported that they would coerce girls to have sex on the pretext of having stronger feelings. They also reported that boys are tremendous pressure to release the

sexual stress and that both genders in the community would expect a boy to have sex early to prove his manhood.

This result provides evidence that young girls do not always have power in relationships even though, at a superficial level, they may refuse sex when they menstruate. This finding is supported by studies such as those by Sathiparsad, *et. al.*, 2010 who also found that sex was equated with manhood and that males reported to be unable to live without sex.

On the surface, the disclosure that girls have the right to decide about sex in the current study seems in contradiction with a study by Lugalla, Emmelin, Mutembei, Comoro, Killewo, Kwesigabo, Sandstrom & Dahlgren (1999: 387) conducted in Kagera, Tanzania that indicated that girls were not allowed to negotiate sex. According to the latter study, it was men who were supposed to decide when sex should occur, with whom, and where and how it should be done. Upon closer analysis of the results of the current study, however, show that, like the Tanzanian study, this also was the case, given that the conditions were limited when women could decide on whether or not to have sex.

When the participants of this study were asked who takes decisions in their own relationships, the majority reported themselves (men) with reasons varying from cultural principles to being the ones who propose to girls, and thus in the privileged position to decide. Like results in the study by Lugalla, *et. al.*, (1999: 387) which found that Ba-Haya women could not propose a sex style to their partners otherwise they risked being accused of infidelity, youth in this study also reported that girls would be labeled if they initiated or decided on sexual matters. In this situation, discussing whether to use condoms was a closed chapter. Women, youth reported, would have difficulty refusing risky sex. According to Greiga, *et. al.*, (2008:S36) gender roles and gender relations that structure and legitimate women's subordination and simultaneously foster models of masculinity that justify and reproduce men's dominance over women and girls, aggravate the spread and impact of the epidemic. Through the enduring *habitus*, boys in this community seemed to also acquire values and beliefs that perpetuated dominance over girls in relationships, which in this instance might increase their vulnerability and risk to HIV and AIDS.

The findings by Lugalla, *et. al.*, (1999:387), which point out that women lacked the freedom and power in matters relating to sex, is confirmed by this study that reveals that culture played a role in discouraging girls or women to propose to boys or men. Youth used metaphors to describe men and their position in relation to women, all of which solidified their power. Referring to men as ‘the head’ and women as shoulders and likening men to powerful animals that hunted for themselves, contributed to secure men’s position as the dominant and women as the dominated. Youth also used animal metaphors to describe masculine practices. For example, they said men were hunters and not to be scavengers who only waited for dead animals. Thus, they sought girls and not the other way around. Men also used the vernacular (‘*tya kulya ngandu tyakulineya*’, meaning that ‘a crocodile catches is only those who goes to the river’) to describe girls who dared to propose. They mentioned that such relationship never lasted long. The overall finding in this regard thus suggests that, despite their perceived power, women have limited agency over their bodies.

The study also found out that male youth invoked their cultural rights when it came to legitimating and guaranteeing their position as initiators and controllers in sex related matters. They believed that boys have the cultural right to initiate sex because males propose and not the other way round. Participants also revealed that it undermined the ability of the men to show their manhood if girls initiated sex. These results link to a study by Lugalla, *et. al.*, (1999: 387) such beliefs were found to be typical in many cultures in sub-Saharan Africa.

The narratives of participants in this study revealed that faithfulness in a relationship was the concern of females for a variety of reasons. First, females were perceived to be better able to control their sexual feelings. Second, physiologically, males needed sexual release to maintain their health and well-being and thus could not always be faithful to one partner. Third, females did not (and were not allowed to) propose, and fourth, it would be easy to detect if they were unfaithful. Finally, it was a shame to the community and family for a female to be known to be unfaithful. Males on the other hand, were *expected* to have more than one partner thus infidelity was assumed to be ‘normal’.

Parents, this cohort reported, condemned their female child more than their son if both were involved in sexual activities. Findings from this study show that girls or women should be treated with respect (as they were potential mothers), but were expected to be submissive and dependent on men in a relationship. Lynch, Brouard & Visser (2009:20) also found this contradiction in a study they conducted.

7.4 Sexuality and Cultural Practices

According to Gupta (2000:2), an individual's sexuality is defined by whom one has sex with, in what ways, why and under what circumstances, and with what consequences. She continues, '... it is more than sexual behavior; it is a multidimensional and dynamic concept which are explicit and implicit rules imposed by society, as defined by one's gender, age, economic status, ethnicity and other factors which influence an individual's sexuality'. Therefore, *habitus* as explained by Bourdieu, shapes young men's disposition, beliefs and values with regard to sexuality. The findings attest to the above statement that an individual's sexuality is indeed shaped by dominant beliefs, values, and norms. This cohort confirmed that the pressure to conform to community expectations sometimes put them at risk of contracting diseases.

Although alcohol was not a critical factor in determining young men's sexual behavior, it was pointed out to motivate young men to get involved in sexual activity after being intoxicated; especially those who went to clubs or bars.

Peers were isolated as exerting the most pressure to conform. Youth modeled their friend's behavior to gain access to girlfriends to prove their manhood. Such a finding is consistent with findings in a number of studies across Sub-Saharan Africa that suggest that youth have sex for the first time because of social pressures (including peers) and environmental conditions (Zulu *et. al.*, 2002; Maticka-Tyndale, *et. al.*, 2005; Tenkorang & Fernando, 2008; Ilika & Igwegbe, 2004 and Temin *et. al.*, 1999). It also confirms notions postulated by Bourdieu's theory of practice that *habitus* not only maintains society (field) and shapes individuals through socialization but also that the very continuity and existence of society depends on the ongoing actions of the individuals (Swartz, 2002:635). Another component of Bourdieu's theory of capital posits that it provides each individual with socially acquired dispositions which serves as

the basis of the dynamics of interaction between individuals within the community (fields). The accumulated knowledge of the agent (male youth) capital is used by the agent to satisfy the expectations from peers. The embodied practices and the accumulated knowledge (capital) of male youth (agents) in this community, as the results indicate, potentially put them at sexual risk of HIV infection.

The narratives of participants in this study indicated that boys in the community were expected to have a girlfriend by the time they reached the age of 21 years. They reported that due to the pressure from peers (to prove their manhood by having sex) many boys had girlfriends, some from as early as 15 years of age.

The study also revealed that cultural practices played a role in influencing young men's sexual behavior because they were 'expected' to prove their virility. This 'proof' translated into many having unprotected sex, with the view to impregnating a girl. They reported doing so to escape the traditional ritual of a charcoal put between the buttocks if they were to die not having had a child. It is important to note that while cultural values, beliefs (habitus) have evolved over time, with education, religion and modernization playing major roles to change the traditional culture, this study found that majority of male youth in this community are cultural nostalgic. Their nostalgia is based on the fact that cultural ideals in the community had been in existence for decades and it is difficult to part ways with those values that their forefathers practiced. This is supported by Nascimento and Martelo (2008) who assert that habitus is what the subject (agent) incorporate in terms of language, cultural biography and individual history, essentially shaped by his social trajectory within family and by the cultural heritage.

The findings revealed that for many in this (including participants), having sex was associated with manhood. Results in this study highlight risky sexual behaviors that were consistent with results in a study by Sathiparsad, Taylor & De Vries (2010). The latter also indicated that the pressure experienced by males to prove virility with the aim of producing children took precedence over the need to protect themselves from or to prevent the spread of sexually transmitted diseases. Participants revealed that they were encouraged to have children, which motivated them to have many sexual partners.

Participants further described a range of risky sexual behavior within their communities such as circumcision, non-usage of condoms, multiple partners and alcohol use as some of the factors that put young men at risk of getting HIV. This finding is supported by studies such as those by Dunne, *et. al.* (2006), Ampofo & Boateng, Sathiparsad and Pattman (in Sathiparsad, *et. al.*, 2010) that found that the identity of males was defined through sexual conquests. These studies revealed that male youth boasted about their sexual performance as part of striving to be a member of the hegemonic masculine group.

The narratives of participants in this study reveal that sex was considered an intriguing topic among boys or men. They often discussed a variety of topics ranging from the use and non-use of condoms, the number of partners one may have, and comparing their sexual experiences. The study also showed that participants encouraged their peers to engage in sexual activity or to have many sexual partners. These findings are consistent with a study by Izugbara & Undie (2008), carried out in Malawi that also suggested that sex was a key topic of interest, curiosity, and fascination among Malawian male youth. Youth in the latter study claimed that sex regularly occupied their private thoughts and that it was also a popular subject in their group conversations. It also attests to Rafanell (2003) opinion which posits that being located in a given field exposes individuals to such practices and attitudes which results in the development of a 'habitus'. These results (past and current study) suggest that the type of discussions went some way to shape youth's beliefs, values, and perspectives and by inference, how they positioned themselves in relation to HIV risk.

7.5 Risk and Vulnerability to HIV infection

Aggleton (2004:7) postulates that certain behaviors create, enhance and perpetuate risk. These might include unprotected sex with a partner whose HIV status is unknown and multiple unprotected sexual partnerships. Risk here refers to the probability that a person may acquire HIV infection. While risk is not always the outcome of certain behaviors, what was evident from participants' responses was that particular male behavior might lead to risk.

Vulnerability on the other hand refers to the increase in the chance to be predisposed to HIV infection as a result of many social and cultural factors, some of which are beyond the control of

a person or particular social groups (UNAIDS, 2005). Bankole, *et. al.* (in Barker & Ricardo, 2005) in their study indicated that awareness about HIV/AIDS and STIs has increased in most parts of Africa in the past ten years, and research shows that at least 90% of young men and women aged 15-19 have heard of HIV/AIDS. Participants in this study showed that all were exposed to different ways on how HIV is transmitted. They also acknowledged that HIV and AIDS was a problem in their community. This result is consistent with a study by Parker & Connolly (2008), which showed that many people in Namibia understood how devastating AIDS was, because many had experienced its effects in close relationships with individuals who have died or are sick due to AIDS.

This study revealed that participants indicated that although people in the community viewed HIV and AIDS as life- threatening; there were those in the community who considered it like any other disease. Some in this cohort noted that people had become blasé about the disease, thinking they could use antiretroviral drugs if they became infected. Some who considered it a serious disease regarded those who were HIV positive already dead or promiscuous. This, the youth reported led to test avoidance by many people in the community.

Similar to a study carried out in Namibia by Brown, *et. al.*, (2005) and Mufune (2005), participants of this study also disclosed that some people in the community considered the epidemic as a punishment from God for being adulterous. Some community members considered it the result of witchcraft or that it was sent from elsewhere through beer to infect people. These misconceptions and continued ‘othering’ of the disease might reduce young men’s fear of the disease and might contribute to risky sexual behavior in this community.

Similar to other studies by the Department of Health and Shisana, *et. al.* (in Leclerc-Madlala, *et. al.*, 2009) conducted in South Africa, participants in this study displayed conflicting views on the use of condoms. Those studies by MacPhail & Campbell, (2001); Meyer-Weitz, *et. al.* (1998); Grieser, *et. al.*, (2001) and Lachenicht (1993 in Leclerc-Madlala *et. al.*, 2009) revealed that some women or girls preferred ‘flesh to flesh’ sex and discouraged their partners to use condoms as it reduced the sexual feeling. Participants in this study reported similar sentiments. These beliefs and reported practice might be fatal for the sexual health of youth in this study. As Baxen

(2010:64) indicated, people are socialized through the day-to-day practices in their everyday lives and in the case of this cohort of male youth, their collective *habitus* (practices) acquired in the community (field) might predispose them to risky sexual practices that make them vulnerable to HIV.

The narratives of participants in this study reveal conflicting views concerning who (between female and male) should propose the use of condoms in a relationship or during sex. Some felt it would be better for a girl to propose the use of condoms as they indicated that there were some boys who were not interested in using condoms (with a beautiful girl with the view of impregnating her so that she will remain with the boy). Girls who encouraged the use of condoms were viewed as protecting herself from pregnancy. Those who supported boys to propose the use of condoms indicated that most girls were shy to tell a boy to use a condom. Some reported that it was a man's right to take decisions in a relationship; stating that some boys would respond angrily when a girl proposed the use of condoms. The contraceptive value of condoms according to Abdool, *et. al.* (1995), MacPhail & Campbell, Preston-Whyte and Zondi (in Barker and Ricardo, 2005) can also contribute to a negative connotation among young men as it militates against young men's notions of pregnancy as proof of masculinity; a source of pride and dominance which increase their vulnerability to HIV.

Evidence from this study reveals that participants were aware of their vulnerability to HIV and AIDS. Many considered themselves vulnerable to the disease, but cited sexual pleasure as the main reason they did not protect themselves. They also reported that death is inevitable and this inevitability (or fatalistic belief) motivated youth to consider sexual pleasure above health and vulnerability to HIV infection. This result confirms evidence from a study by Le Beau, *et. al.* (2001) indicating that for some, while acquiring HIV was a concern, it was not the primary concern in the sexual decisions they made. It also confirms a study by Van Zyl & Keulder (in Swartz, 2003) conducted in Namibia, which found that while HIV and AIDS is commonly identified as the main risk of sexual activity (closely rivaled by pregnancy among females), it was still not the top concern among young people. Results also suggest that youth in this study held conflicting views on whom between males and females, was more vulnerable to the disease.

In sum, the overall results in this study highlight the complex social space that these cohorts make meaning of their sexual and masculine identities. Highlighted here are the social and cultural discourses that shape individual and collective *habitus*'s, some of which provide conflicting messages that make it difficult for youth to make informed sexual choices that do not predispose them to HIV infection. Youth reported that prioritizing their sexual and social identity as man and thus oftentimes ignored their health status; an aspect that created risk and made them vulnerable to HIV infection. The continued engagement of male youth in risky sexual behavior which lead to their vulnerability to HIV infection which will have serious implications for education since majority of them are of school going age. Some of the implications could be absenteeism due to illness or funeral attendance which will increase the problem for education quality. Another implication could be orphans who will drop out of school due to hardships faced at home and discrimination from peers at school defeating the goal of "Education for All".

Chapter 8 Conclusion and Recommendations

8.1 Concluding the Study

The aim of the study was to investigate the social and cultural discourses that shape male youth's masculinity and conceptions of risk and vulnerability to HIV and AIDS in Rundu Urban Constituency, Kavango Region, Namibia. Although I strove to do the study drawing on a relatively heterogeneous population of male youth who lived in a particular setting, I acknowledge that hegemonic masculinities vary from one context to another, influenced by class, educational attainment and tribal origin. It is clear from the findings that social and cultural practices played a role in shaping male youth's conceptions of risk to the disease. The findings of this study confirm research findings that found that HIV prevention strategies that focus primarily on changing attitudes towards sexual behavior, and altering sexual behavior itself may be gravely compromised by not paying attention to the conditions that shape beliefs, values and attitudes (in other words, *habitus*) (Harrison, Smit & Myer, 2000).

The main finding from this study is that the social and cultural practices in which young men construct their sexuality and where they mediate their masculine identities influences how they experience themselves as men and as sexual beings. This space, as the results showed, predisposed them at risk of HIV infection. By and large, evidence from the study suggests that addressing the sexual behavior of young men in Rundu Urban constituency may not be simple because it is linked to social and cultural beliefs which are ingrained in their community.

Moreover, social and cultural constructs that define reproductive norms in the area have evolved over generations and have been justified and internalized by both men and women, young and old. For example, in this study, a large number of participants acknowledged that men's virility was judged by reproducing children and having multiple sexual partners since people in the community encouraged it and were comfortable with it.

Risk taking behaviors like alcohol intake was reported to be prevalent among male youth, which may put them to be increasingly predisposed to risky sexual practices. This may be the consequence of the proliferation of bars, which were found at every corner of the town and the absence of other safe places or arranged youth programs to pass their leisure time. This

qualitative study also found that many young people engaged in sexual activities at an early age, which might put them at risk of HIV in the long run as they continued to change sexual partners before they formed long-term monogamous relationships.

Although participants acknowledged the danger that HIV and AIDS posed in their community, they admitted being indifferent to the use of condoms as it compromised their sexual pleasure on the one hand, and social identity as men on the other hand.

From this study, it may be deduced that male youth are at risk for HIV/AIDS because they report that faithfulness was mostly the concern of females. They reported that being faithful was difficult as the community viewed such men as either bewitched by their partners, gay or without feelings for other girls. Put differently, such men lacked the characteristics of a 'real' man.

Gender differences in sexual initiation and negotiation were found to be prevalent in the community. While participants were vocal that only males can verbally initiate a relationship, females were acknowledged to have rights to refuse sex primarily when they were menstruating. It was also revealed that girls or females were encouraged to propose the use of condoms on the basis that many young men did not like to use condoms and needed to be reminded by their female partners.

The myths which circulated in the community that the epidemic was a punishment from God for being adulterous, that it was caused by witchcraft, and it was sent from somewhere through beers to infect people could be fatal to young men and the decisions they make relating to their sexual health. These misconceptions and continued 'othering'⁷ amongst the cohorts in this study, seemed to reduce young men's fear about the disease and potentially created the space for them to reproduce the dominant patterns of 'accepted' behavior, despite the knowledge they have about the disease.

⁷ Othering in terms of how the disease is contracted, who is responsible in spreading the disease, and who is responsible to ensure that partners are safe.

In this community, the importance attributed to marriage as a requirement for one to be considered a 'real' man as it was found, might put young men at risk of HIV as this might lead to early sexual debut, multiple partners, risky sexual practices, and early marriage. In addition, the fact that single men were labeled in different ways that lessened their identity as 'real' men, might lead youth in this community to engage in behavior that might put them at risk of sexual diseases including HIV infection.

The double standard that gave men power outside and in marriage to make choices might be calamitous to the cohort of youth in this community, which could put them and their partners at risk of sexual diseases including HIV.

The belief by the young men in this community that it was 'normal' for men to have multiple partners as this led to praise and respect from peers, also might encourage male youth to have participate in the practice. In addition, the belief in the community which circulated among boys that one cannot 'live on bread alone' everyday (referring to one partner) might impel young men to engage in sexual activities with many partners. The revelation that having one sexual partner was considered by many boys to lead to boredom might also lead to risky social practices that increase the odds of acquiring HIV. In addition, having multiple partners increased the likelihood of inadvertently passing the virus to several other persons.

Like the social and cultural beliefs and practices that predispose male youth to risky sexual behavior above, the expectation by parents on the need of the male child to procreate to get the assurance that he too was virile, might result in young men in this community having sex, possibly with many partners. This expectation might also create risk and vulnerability toward HIV infection.

8.2 Recommendations

Male youth do not exist in a vacuum in society. They make meaning of their lives in complex environments that do not always offer them alternatives to make informed sexual choices. Dealing with social and cultural practices that have endured for a long time remains a challenge, with solutions not easily forthcoming. Multi-pronged approaches that include interventions at the

school and community levels may go some way to address complex issues faced by youth in this community.

The comfort and openness with which this group of youth shared their stories was instructive for interventions going forward. Their willingness to dialogue was a surprising outcome of this research. In part, such openness about a sensitive topic was made possible by (a) interest in the topic (something that youth also reported on); (b) the time of day and venue, (c) willingness by the researcher to listen and not judge, and (d) group structure. Paying attention to such aspects may be the first step in ensuring fuller participation by youth in discussions that pertain to their sexual well-being.

Not only would it be important to consider the above; any intervention and/or programme (especially those offered in schools) promoting safe sexual practices ought to also take account of the following:

- Understand the real-life situations and pressures young men face in *particular and situated contexts* to ensure that discussions be situated in space and time; and
- Develop programmes that address a broad range of issues that interrogate and confront certain and social cultural beliefs and values.

In conclusion, while this study identified key dimensions of the participants' constructions of their sexuality and aspects that shaped their sexual behavior, this was done in a largely descriptive manner. Each of the aspects of social and cultural practices may usefully form the focus of more in depth analyses, both to intensify understanding and to begin to render a more lucid theory of the relationship between social and cultural discourses, individual practices and the psychological processes by which these are mediated.

With regard to antiretroviral drugs, research that furthers an understanding of its negative implications would be useful especially in light of the fact that people viewed it as an antidote to the problem rather than merely treatment to prolong life.

Lastly, research is required to investigate the deep-rooted cultural practices or beliefs that continue to reinforce and reproduce dominant masculine identities in the region.

Chapter 9 List of References

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Chapter 10 Appendices

APPENDIX A: Population per region in Namibia

Region	Population
1. Caprivi	90 100
2. Erongo	150 400
3. Hardap	79 000
4. Karas	76 000
5. Kavango	222 500
6. Khomas	340 900
7. Kunene	88 300
8. Ohangwena	245 100
9. Omaheke	70 800
10. Omusati	242 900
11. Oshana	174 900
12. Oshikoto	181 600
13. Otjozondjupa	142 400

Source: National Planning Commission, 2011

APPENDIX B: HIV prevalence rate for those aged 15 – 49 years of selected regions

Region	HIV prevalence rate
1. Hardap	9,8%
2. Karas	15,6%
3. Kavango	17,2%
4. Khomas	16,3%
5. Kunene	12,8%
6. Omaheke	15,6%
7. Otjozondjupa	12,9%

Source: Ministry of Health and Social Services (2010)

APPENDIX C: INDIVIDUAL INTERVIEWS

FIRST ROUND

1. Tell me about yourself and your family?
2. What are things that are important to your family?
3. What are some of the things your family says are important in life?
4. Are there any rites of passage/rituals that people in your community go through? If yes have you gone through these and how did it mean to you? What would be your response if you do not, or if you have not yet done so? How would you feel about not going through this process? What are community views on this process and how do you feel about their views? How does your family feel about you participating in these rites of passage?
5. Who is your role model in the family? or in the community and why
6. When in your community are you considered a MAN? **OR** If people say you are a man in your community, what do they mean?
7. What are the expectations of being a man in your community?
8. What are the things that you can do in your community that will make people respect you for as a man?
9. What are things that you may do that will cause people to think differently about you as a man?
10. What do people in your community say about how girls should act?
11. What do your friends say about how men should treat girls?
12. Do you discuss sex with your friends? What do they say about the topic?

SECOND ROUND

1. In a relationship who should decide how and when sex should take place?
2. In your own relationship/s who decides how and when sex should take place and why?
3. In the first scenario read to you, what do you think was going on in Haushiku's mind on their way to the room?
4. If you were Haushiku what would you be thinking on your way to the room?
5. From the first scenario read to you what do you think about Matumbo's refusal to sex?
6. From the first scenario what do you think about Haushiku's reaction to Matumbo's refusal to sex?
7. If you were in the same situation how would you have reacted to Matumbo's refusal to sex?
8. From the first scenario do you think it was Matumbo's right to say no to sex?
9. In your view, what drives your and other young men's sexual behavior in your community?
10. What are the things in your community, which motivates you to be sexually active and explain how it motivates you?
11. What are the things in your community or culture do you think put young men at risk of getting HIV?
12. In your view who between male and female should have multiple partners and why?
13. How many sexual partners do you think a man should have?
14. What kind of sexual conversation do you engage in with your peers or any other male groups?
15. In your view should condoms be used during sexual intercourse and who should decide the use of condoms and why?

FOCUS GROUP DISCUSSION

First Focus Group Questions

Scenario Questions

1. What do you think about the three boys in the story?
2. What would the boys (or men) in your community say about Peter (without a girlfriend)?
3. How would you respond to Peter (B)?
4. How would you feel if you were Peter?

Masculinity questions

1. What does it mean to be a man to you?
2. How do people in your community describe what it means to be a man?
3. If you are considered a man, what are you allowed to do (able to do)?
4. You are considered a man, what are you not able to do or behave?

Sexuality

1. When are you considered a man in your community?
2. Are men and women treated in the same way in your community? Why/why not?
3. How are men viewed in your community who choose not to marry?
4. What makes you different to females?

Second Focus Group Questions

Relationships

(Scenario) a girl letting a boy know that she likes him

1. What do you think about the girl in the story?
2. Who should initiate relationships and why?
3. What are your views on men who have one girlfriend only?
4. Would you agree with someone having sex before marriage?
5. What is your opinion when a male partner in a relationship uses a condom?
6. What is your opinion when a female partner in a relationship proposes to use a condom?
7. Do women have a right to refuse sex with her male partner anytime she wants?
8. Do you think that women should be submissive and dependent on men in a relationship?
9. In your view between men and women in a relationship who should be faithful?

HIV questions

1. How is HIV transmitted?
2. Do you think that HIV and AIDS is a serious problem in your community?
3. Do you consider yourself vulnerable or at risk to HIV infection?
4. Are you concerned about contracting HIV?
5. How are HIV and AIDS perceived in your community?
6. In your view which gender (male or female) is more vulnerable to HIV infection and why?

APPENDIX D: SCENARIOS

Scenario A

Peter grew up in a very religious family and never had a girlfriend. After his grade 12 he was admitted at the university where he met two new friends. His new friends all of them had girlfriends. After a month his friends started to pressurize him to get a girlfriend if he is to be recognized as a man by the group. Due to his religious background he refused the idea. After constant pressure from his friends he gave in and he started proposing a girl who later became his girlfriend and had sex for the first time with this girl.

Scenario B

Matumbo (name of a girl) and Haushiku (name of a boy) met at a grade 11 farewell party. From the party they decided to go to Haushiku`s room at his parent`s house. Arriving in Haushiku`s room they start kissing. Haushiku reaches for the condom. At this point Matumbo stops and tells Haushiku that she is not ready to have sex with him. Haushiku ignores Matumbo and continues to kiss her even more passionately. Matumbo pushes Haushiku away but now he starts to use force. He pushes her to his bed and had sex.

Scenario C

Theresia a grade 12 learner likes Joseph the head boy of their school so much. At one of the grade 12 learner`s birthday party she calls him aside and tell him that she loves him. Joseph tells her that he does not like her.

APPENDIX E: Permission Letter: Director of Education

The Director of Education

Kavango Region

Rundu

Namibia

PERMISSION TO CONDUCT RESEARCH IN SCHOOLS

I am Master Degree student in the Education department at Rhodes University who seeks permission to conduct research at two selected schools in Rundu urban constituency namely. My research is titled: **The social and cultural practices that shape young men’s masculinity and conceptions of risk and vulnerability to HIV and AIDS in Rundu Urban Constituency of Kavango region, Namibia.**

The research is to be conducted among young men aged 17 – 20 years who will voluntarily agree to take part in the research. In order not to interrupt the school programme, interviews will be conducted after school during the learner’s free time. The research will be carried out from 06 February – 10 March 2012.

It is hoped that my study will contribute to the understanding of the practices which continue to contribute to the increase of the epidemic. Enclosed here is a letter from my University explaining the nature of my research.

Thank you very much

Yours Sincerely

.....

Faustinus Shikukutu

APPENDIX F: Permission Letter: Principal

The Principal

.....

Rundu

Namibia

PERMISSION TO CONDUCT RESEARCH IN YOUR SCHOOL

This letter is to ask for permission and at the same time inform you that I have selected your school as one of the schools in the Rundu Urban constituency where I intend to conduct my research. The research will be carried out from 06 February – 10 March 2012.

In order not to interrupt your school programme, interviews will be conducted after school during the free time of the selected participants. I have received permission from the Regional Education Director to conduct my research to show that what I plan to do is not underhand. Enclosed here is a letter from my University explaining the nature of my research and the letter from the Regional Education Director.

Thank you very much and I am looking forward to conduct my research at your school.

Yours Sincerely

.....

Faustinus Shikukutu

APPENDIX G: CONSENT FORM

RHODES UNIVERSITY DEPARTMENT OF EDUCATION

Research Title: The social and cultural practices that shape young men's masculinity and conceptions of risk and vulnerability to HIV and AIDS in Rundu Urban Constituency of Kavango region, Namibia.

Interviewer : Faustinus Shikukutu

Telephone number: +264812711086/ +27787161118

Supervisor : Prof Jean Baxen, PHD

Telephone number: (27)46 603 8698 (w)/ (27)82 321 3936 (mobile)

INTRODUCTION

You are invited to take part in a research. Before you decide to be part of this study, you need to understand the risks and benefits. This consent form provides information about the research. I will be available to answer your questions and provide further explanations where needed. If you agree to take part in the research, you will be asked to sign this consent form. This process is known as informed consent. Your decision to take part in the study is voluntary. You are free to choose whether or not to take part in the study. Participants in the study should be young men aged 17 – 20 years old who are permanent resident of Rundu Urban constituency.

PURPOSE

The research will be conducted at two secondary schools in Rundu Urban constituency among young men aged 17 -20 years old. The main aim of the study is to understand the socio-cultural practices in the constituency that makes young men vulnerable to HIV infection. The interview will be conducted in the local languages of the participants and English and will take place after school at an agreed venue. Each interview will last for 60 minutes and each interviewee will be interviewed for two days. For those who will be selected to take part in individual interview will have another day for interviews or discussion.

POSSIBLE BENEFITS

You will not get any personal benefit from taking part in this study but will get opportunity to learn how a research is conducted and will learn from others how to answer questions and possible new knowledge from other participants.

RIGHT TO WITHDRAW FROM THE STUDY

Your participation in the study is voluntary and you may decide not to begin or to stop this study at any time.

PRIVACY OF RESEARCH INFORMATION

Your information will be kept private and confidential. No one will know except for the interviewer that you I part of this study. The supervisor acting on behalf of the university may review your information and if that happens only information related to the study will be availed to her. Except for the supervisor at the university, your information will be kept private unless you permit the release of it or when the information is asked for by court order. Your information will be used for research purpose only. During interviews I will take notes and at the same time tape record the conversations and no real names should be used during the occasion without your permission.

SIGNATURES

By signing this consent form, you agree that you have read this informed consent form, you understand what is involved, and you agree to take part in this study. You do not give up any of your legal rights by signing this consent form.

.....
Participant (Print name)

.....
Signature

.....
Date

RESEARCH STATEMENT

I certify that the research has been explained to the above individual by me including the purpose, the procedures, the possible risks and the potential benefits associated for participating in this research. Any questions raised have been answered to the individual’s satisfaction.

Faustinus Shikukutu
Interviewer

.....
Signature

.....
Date

APPENDIX H: LETTER FROM UNIVERSITY TO CONDUCT RESEARCH



RHODES UNIVERSITY
Grahamstown • 6140 • South Africa

EDUCATION DEPARTMENT
Tel: +27 (0) 46 603 8383
Fax: +27 (0) 46 622 8028
PO Box 94, Grahamstown, 6140
E-mail: education@ru.ac.za

10 November 2011

To whom it may concern,

Dear Sir / Madam

PERMISSION TO CONDUCT RESEARCH

CANDIDATE: FAUSTINUS SHIKUKUTU
STUDENT NUMBER: 607S0621

This letter is to confirm that Faustinus Shikukutu is a registered student with the Education Department at Rhodes University. He has been registered for a Masters in Education.

Faustinus Shikukutu will be required to conduct research for his thesis. This letter serves to request permission for Mr Shikukutu to conduct research in your school for this purpose.

His proposal was approved by the Education Higher Degrees Committee. His proposal complied with the ethical clearance requirements of the Faculty of Education. I trust that his application for leave meets the necessary requirements.

Yours Sincerely

Dr Bruce Brown
Head of Department

APPENDIX I: PERMISSION FROM REGIONAL EDUCATION OFFICE



REPUBLIC OF NAMIBIA

**MINISTRY OF EDUCATION
KAVANGO REGION**

Telephone : (066) 258 9111
Fax Number : (066) 258 9213 / 258 9320
Email : kapapero@iway.na
Enquiries : Fanuel Kapapero

Private Bag 2134
RUNDU

06 January 2012

The Principal
Rundu Senior Secondary School
Kavango region

Permission to conduct research: Mr. F. Shikukutu

Permission has been granted to the above student to conduct research for his Masters in education programme at your school. The regional office fully supports that Mr. Shikukutu engages in this research towards the completion of his studies.

We thank you for your support and understanding.

Yours in education


FANUEL KAPAPERO
ACTING DIRECTOR

